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Annual Report
Newark

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Department of Health and Welfare
Newark, N. J.

HUGH J. ADDONIZIO

MAYOR, CITY OF NEWARK, NEW JERSEY

MEMBERS OF THE CITY COUNCIL

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ANTHONY IMPERIALE

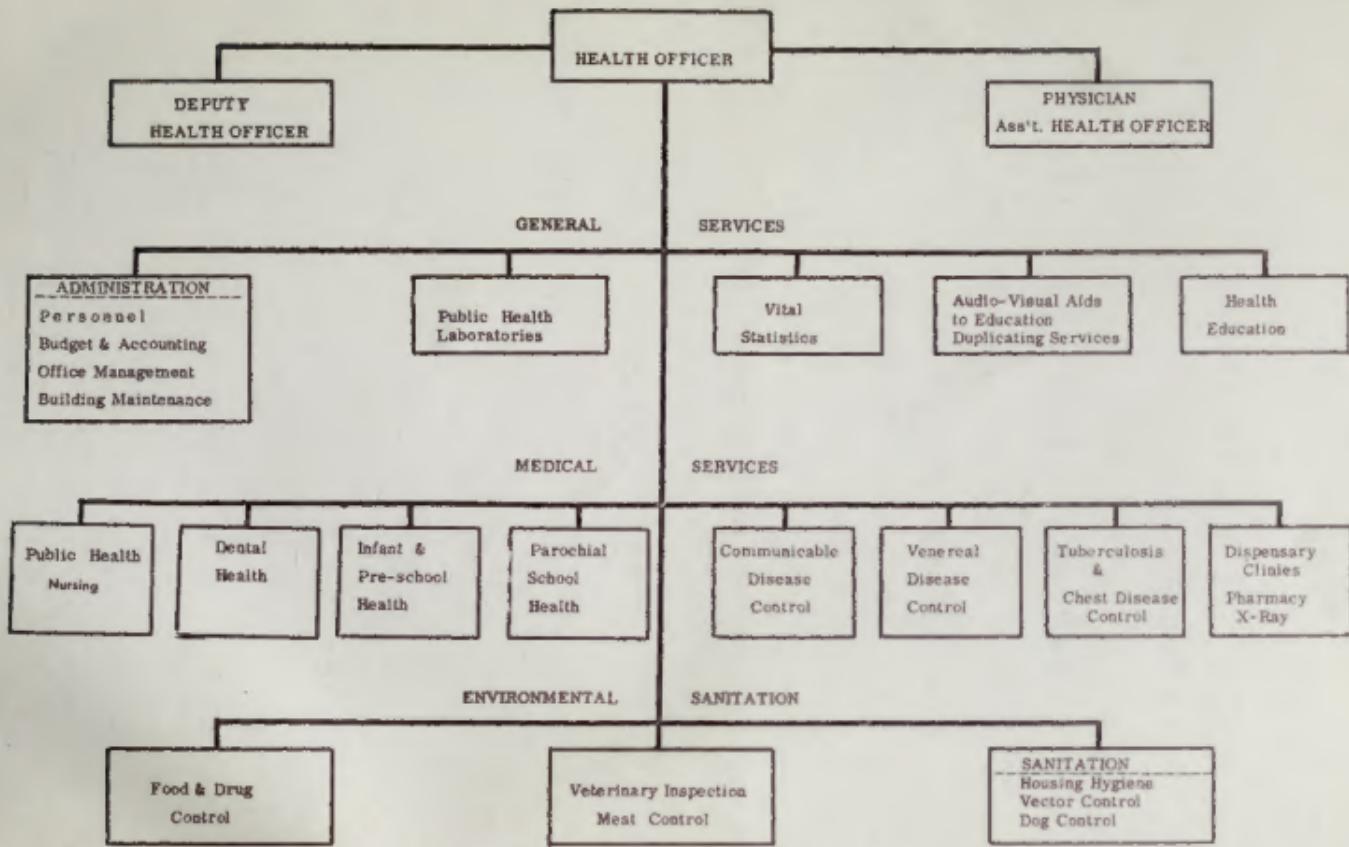
JOSEPH V. MELILLO

LOUIS M. TURCO

IRVINE TURNER

RALPH A. VILLANI

CALVIN D. WEST



DEPARTMENT OF HEALTH & WELFARE
Director - Mrs. Larrie W. Stalks

DIVISION OF HEALTH
Newark, New Jersey

Health Officer - Aaron H. Haskin, M. D., M.P.H.
Phys. & Asst. Health Officer - Michael J. Fratantuno, M.D.
Asst. Health Officer - Carl Cordasco, B.S., Ph.G.

GENERAL SERVICES

ADMINISTRATION	Aaron H. Haskin, M. D., M.P.H., Health Officer
HEALTH EDUCATION	Mary T. Egli, M.S.P.H., Health Educator
AUDIO-VISUAL AIDS	Wesley D. Jones, Supervisor
VITAL STATISTICS	Nathan Hershkowitz, Supervisor
PUBLIC HEALTH LABORATORIES	Carl Cordasco, B.S., Ph.G., Chief Supervisor
Serological	Meyer Levy, B.S., Supervisor
Chemical	Sara Rothberg, B.A., Chief Chemist
Bacteriological	Fred Coltrell, Chief Bacteriologist

MEDICAL AND DENTAL BUREAU HEADS

CHILD HYGIENE - William Spinoza, M. D.	DISPENSARY - M. J. Fratantuno, M. D.
CHEST DISEASES - John H. Alcamo, M. D.	DENTAL - Harold R. Harlan, D. D. S.
VENEREAL DISEASES - Nicholas Del Deo, M. D.	CONTAGION - Joseph W. Gardam, M. D.

CHIEF PHARMACIST

Laurence J. Ilaria, Ph.G.

CHIEF VETERINARIAN

John Devine, D. V. S.

SUPERVISING CHIEF INSPECTORS

ENV. SANITATION	Edward A. Smith
CONTAGION	William S. Jennings
FOOD & DRUG	Michael Carson
MEAT INSPECTION	Joseph Hearl

PUBLIC HEALTH NURSING SERVICE

DIRECTOR	Mary Hoban, R. N., M.A.
ASST. DIRECTOR	Petrina Livecchi, R. N., B.S.M.S.

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WHAT YOUR HEALTH BUDGET PURCHASES

Some people do not realize the many valuable services paid for by the Health Division Budget. Too often it is felt that we merely investigate neighborhood nuisances or placard for contagious diseases. Following is some of the work made possible by our budget.

NOT ONLY - Environmental sanitation; dog licensing and rabies control; infant boarding home supervision; computation and study of vital statistics.

BUT ALSO

- 1 - Medical Care: Approximately 25% of our budget is spent to provide clinic treatments, free medication, physician home visits and nurse home visits, to those individuals who are unable to provide adequate medical care for themselves, or their families, through private medical facilities.
- 2 - Disease Control and Prevention: Frequent case-finding programs are conducted for early detection of Tuberculosis and Syphilis. X-ray screening and Tuberculin Testing are two measures used most extensively at this time for finding, and thus providing early treatment for unsuspected Tuberculosis cases. The public is encouraged to take advantage of free blood test programs which are conducted routinely for the purpose of diagnosing early syphilis.

During the year 1968, our eminently successful campaign was continued against Diphtheria, Whooping Cough, Tetanus, Poliomyelitis, and for vaccination against Smallpox. The Parochial Schools Bureau, through the co-operation of the Superintendent of Archdiocesan Schools, requires all new students whether enrolling for the first school grade, or transferring into this school, to have full immunization prior to admission.

- 3 - Supervision for Healthy Babies: Monthly visits are made by nurses to instruct mothers as to the proper care for babies, including visits to baby stations or to private pediatricians. The home visit includes discussions of behavior problems which require prompt attention if we wish to guard against possible abnormal mental development in later life.
- 4 - Parochial School Health Program: Secure and maintain for each individual child the greatest measure of good health, conduct health education programs with individual parents and through P.T.A. conferences, faculty conferences, health talks, and films for the teacher and students, and to continue to educate the general public through referrals to community agencies for all who request assistance. This work is conducted by the Board of Education in public schools.
- 5 - Children's Dental Care Program: Free dental treatment is provided for an approximate total of 7,000 public and parochial school children who are eligible to receive it. This service is offered at the main building of the Health Division and in nine neighborhood clinics throughout the city.
- 6 - Food Inspection: Secure maximum sanitation methods for the preparation, display, and serving of foods, and of the food establishment.
- 7 - Pure Milk: Insure a pure supply of milk. In order to ascertain that the milk is pure, every individual, item, animal, and building which is in any way associated with housing, obtaining, providing, containing or preparing milk for distribution, is thoroughly inspected.
- 8 - Hay Fever Control: Through weed extermination.

HEALTH OFFICER'S REPORT - 1968

Newark, New Jersey

TO: Hon. Hugh J. Addonizio, Mayor - Members of the City Council
Director Larrie W. Stalks, and Citizens of Newark, New Jersey

The year 1968 has been a memorable one for the City of Newark as far as public health is concerned. As a result of state health aid, many old programs were enhanced and new programs developed.

GENERAL MORTALITY

The adjusted general mortality rate has decreased from 8.9 per M in 1967, based on estimated population of 410,000, to 8.7 per M in 1968, the lowest in Newark's history. However, Heart Disease and Cancer still are our greatest killers and much work still has to be done in the field of Chronic Disease Control.

TUBERCULOSIS MORTALITY

As a result of the increased efforts in case finding and close supervision of contacts, and better reporting of active cases, there was a slight increase in numbers of new cases from 323 in 1967 to 336 in 1968 - mortality on the other hand decreased from 8.78 in 1967 to 6.8 in 1968.

INFANT MORTALITY

Infant mortality has decreased from 38.6 in 1967 to 36.8 in 1968. However it should be noted that while congenital debility and prematurity are still the greatest causes of death under 1 year of age, the actual numbers have decreased slightly. This is an encouraging sign because prior to 1966 these numbers were increasing. Apparently prenatal services are beginning to show results.

YEAR	INFANT DEATHS BY AGE GROUPS			OVER 1 WK.			UNDER 1 DAY
	TOTAL	UNDER 1 YEAR	UNDER & UNDER 1 MO.	1 MONTH	UNDER 1 WEEK	NEXT 6 DAYS	
1966	389	107	282	38	244	125	119
1967	412	88	324	37	287	98	189
1968	374	101	273	38	235	86	149

INFANT DEATHS

PLACE OF DEATH BY AGE GROUPS

1968

1967

INSTITUTION	TOTALS		Over 1 Week & Under 1 Mo.				TOTALS		TOTALS		Over 1 Week & Under 1 Mo.					
	Under 1 Yr.	Under 1 Mo.	Under	1 Mo.	Over	1 Week	Under	1 Mo.	Under	1 Week	Under	1 Mo.	Under	1 Yr.	Under	1 Mo.
City	205	43	162	19	143	55	88	218	29	189	23	166	65	101		
Babies'	37	20	17	7	10	7	3	24	13	11	5	6	6	0		
Beth Israel	48	6	42	5	37	14	23	40	7	33	1	32	15	17		
Columbus	5	0	5	1	4	1	3	16	2	14	0	14	3	11		
Presbyterian	14	1	13	1	12	0	12	21	0	21	1	20	1	19		
St. James	15	1	14	2	12	4	8	22	3	19	1	18	3	15		
St. Michael's	31	11	20	3	17	5	12	42	10	32	3	29	5	24		
Home	19	19	0	0	0	0	0	29	24	5	3	2	0	2		
GRAND TOTAL	374	101	273	38	235	86	149	412	88	324	37	287	98	189		

VENEREAL DISEASES

Our venereal disease program is continuing vigorously. New syphilis patients have decreased from 624 in 1967 to 338 in 1968, a very significant drop and a measure of the effectiveness of our program, namely, early diagnosis and early treatment to prevent its spread. However, gonorrhea has increased. This is due to the more effective follow up of contacts. As this program continues, we will soon reach a plateau as we have in syphilis and the numbers will decrease as in syphilis.

MEDICAL CARE OF THE SICK

The Health Division provides medical care to all residents who are indigent. Approximately 25% of the budget is used for this purpose. In addition to diagnostic procedures, medications are prescribed and prescriptions are filled. Treatments are provided in the various clinics. Home calls for the medically indigent and relief cases are paid at the rate of \$5.00 per day visit, and \$7.50 per night visit.

It is interesting to note that the number of patients receiving treatment is continuing to drop from 29,285 in 1967 to 24,420 in 1968, and prescriptions filled have dropped from 75,531 in 1967 to 67,381 in 1968. This was, in a large measure due to the medicare program, and the clinics of the N.J. College of Medicine & Dentistry. When the Medicaide Program begins to have its effect, we may expect a further sharp reduction.

HEPATITIS This disease had again run relatively heavy and involved the 15-35 age group more than others. There has been a 50% increase in number of cases in 1968 over those of 1967.

BIRTH STATISTICS

There were 10,168 births or a crude birth rate of 24.8 per thousand. Being a hospital center, Newark had 2,028 non-resident births, subtracting this, we have an adjusted total of 8,140 Newark births, or an adjusted birth rate of 19.8 per thousand. Also there were 910 Newark births that took place out of town. Although, more of a social than a public health problem, the rate of births out of wedlock is startling. Of the 2,596 births out of wedlock, 2,473 were Newark babies, which means that of the 8,140 Newark babies, over 30% per M live births were reported as births out of wedlock.

HEART DISEASES

The major cause of mortality is Organic Heart Disease, with 1,915 deaths in 1968, an increase of 90 over 1967. There can be little question that much of the increase in recent years is due to the increased life span.

MATERNAL MORTALITY

There were 2 maternal deaths out of 10,168 births, plus 212 stillbirths. Maternal mortality has been decreased 80% since the Medical Society formed a

Maternal Welfare Commission to cooperate in this work with us some twenty-five years ago

HEALTH EDUCATION

The year 1968 was our first full year of operation of our Health Education Bureau and its more detailed description in another section of this report has many interesting facts. However, it is important to note here that the multi-phasic screening program is having a great effect on the local communities it serves and will continue to be an important educational program in acquainting the citizens with their physical defects and bringing them to proper treatment.

GENERAL SERVICES

ADMINISTRATION

The Administrative Bureau coordinates all the activities of the Health Division under the direct supervision of the Health Officer. This includes Accounting and Budgeting, Personnel Records and Assignments, Building Maintenance (cleaning and Heating). In addition, the executive staff functions as a 'clearing house' for the many daily inquiries that come in by letter, telephone and personal inquiry, as well as editing the annual Health Department report.

Audio-Visual Service This Service, while being an integral part of the Bureau of Health Education, is responsible for a number of specific functions including the scheduling and programming of food handlers classes, preparation of audio-visual aids, utilization and maintenance of projection and sound equipment, control of all stationery supplies for the Division of Health, and the reproduction and printing of all forms and other printed materials used within the Division.

Food Handlers classes are conducted for training restaurant workers in the proper and sanitary handling of food. Attendance is required by City Ordinance.

The course of instruction includes lectures by staff doctors and inspectors, supplemented by slides and recordings to further illustrate the material. More than 20 000 people have had 3 hours or more of orientation in modern methods of handling and storage of food since this program was instituted in 1949. The last class for 1968 was held in the First Presbyterian Church on Broad Street in Newark, a policy that we hope to continue, making access for our students easier, using any mode of transportation.

When special mass immunization programs are conducted such as polio or influenza, the A-V Service provides a fully-equipped sound truck for broadcasting in the street. An appropriate message is pre-recorded and played back on a tape recorder from the mobile unit.

The A-V Service is responsible for designing all stationery forms, booklets, reports, leaflets, etc. Most of this printed material is obtained from commercial establishments through the Central Purchase Division. All specifications are drawn in this office and it handles all budgeting details in this connection.

Great savings are effected by being able to reproduce office forms, leaflets, and other printed material within the organization. Only printing which cannot be done economically in the Bureau, or would be otherwise restricted by policy, is procured by contract with outside firms. Work done in the Bureau is limited to forms which are used within the Division and are not seen by the public.

The great value of this service lies in its accessibility to the rest of the Division of Health. The close collaboration afforded by this arrangement permits users of the A-V Service to express their exact needs on a personal contact basis, thus providing faster and more complete service.

FINALCIAL STATEMENTS

	1967	1968		1968
Personal Services			Personal Services	
(Salaries) 410 Employees	\$2,166,953.00		(Salaries) 397 Employees	\$2,575,505.00
Other than Personal Services	220,055.00		Other than Personal Services	209,266.00
Total	\$2,387,008.00		Total	\$2,784,771.00
	<u>TYPE OF EXPENDITURES (other than salaries)</u>			
	<u>1967</u>	<u>1968</u>		
Dr. Home Calls	4,000.00	3,952.00	In-Service Training	-
Nurses' Calls V.N.A.	-	48.00	Carfare-Travel Allow.	28,860.00
Drugs-Clinic Supps. 60,615.00	60,615.00	60,615.00	Milk-Food Samples	183.00
			Cleaning Hlth Stats.	6,150.00
Lab. & Dental Equip.			Furn. & Clinic Equip.	4,860.00
& Supplies	13,000.00	13,000.00	Light & Heat	12,800.00
X-Ray Film Service	11,500.00	11,500.00	Rent Annex & Stats.	15,250.00
Tele Service	14,140.00	14,140.00	Printing-Stationery	16,430.00
Postage	3,500.00	3,500.00	Miscellaneous	28,117.00
Polio & Flu Vaccine	650.00	870.00	Totals	220,055.00
				\$209,266.00

RECEIPTS

Note: These receipts are deposited with the City as Misc'l. receipts and are not reflected in our Budget.

<u>Permits</u>	
Chicken, Animal, etc.	38.20
<u>Licenses</u>	
Ice Wagons	55.00
Meat Jobbers	2,190.00
Refuse Trucks	72.00
Milk Store-Del.	2,830.00
Meat Plants	3,950.00
Live Poultry	150.00
RX-Bottle Money (Sales)	209.65
Telco Refunds	37.47
Newark TB EPI Project	910.00
Miscellaneous	460.89
Fees-Birth, Death & Marriage records, Permits & transit	74,149.00
	\$85,051.71

DOG CONTROL ACCOUNT

A separate "Dog Control Account" is also kept. Dog License receipts maintain the fund which pays all cost except salaries, such as dog trucks, rabies - vaccinations fees and equipment.

Balance on Jan. 1, 1968	3,946.00
Transfer from Dog Control Acct.	45,000.00
	48,946.00
	<u>Disbursements</u>
State Fees	4,310.50
Shelter Rent	24,999.96
Vaccinations	5,613.50
Stationery-Printing	110.16
Trucks	9,360.63
Miscellaneous	1,566.12
Balance on hand 12/31/68	2,985.13
<u>Receipts Collected - 1968</u>	
8,653 Dog Licenses	34,612.00
4 Seeing Eye Dogs	-
95 Dogs Redemed	455.00
8 Pet Shop Licenses	80.00
1 Kennel License	10.00
Total 1968 Receipts	\$35,157.00

DAIRY INSPECTION ACCOUNT

A separate "Dairy Inspection Account" is also kept for cost of out-of-town Inspections. Dealers pay such cost as travel, hotel, meals, etc. They maintain a balance at all times.

<u>Expended 1967</u>	<u>Expended 1968</u>
\$34,811.51	\$34,199.30
Balance on hand Jan. 1, 1969	\$27,818.82

HEALTH EDUCATION

Mary T. Eglit, M.S.P.H.
Health Educator

In its first full year of operation, the Bureau of Health Education took some positive steps toward achieving the standards of the New Jersey certified Health Service. The personnel of the Bureau consisted of a qualified Health Educator, five Field Representatives, and one Steno-Typist.

The functions of the Bureau were varied and included

1. The distribution of health literature to schools, college students and interested groups
2. Collecting and keeping of current data concerning programs of other Agencies that could be useful in furthering Community Health Education
3. Work with community leaders and groups in the solving of health problems
4. Participating in formulation of Agency goals and policies
5. Establish Health Education objectives for specific activities.
6. Maintain a collection of reference material on Health Education and various health topics for use in Agency staff and community groups

The primary goal of the Bureau is to influence positively, the quality of community health through the utilization of the educational process. This goal can only be achieved by keeping in close contact and working with various community organizations some of which are the United Community Corporation, the Head Start Program, FOCUS, and religious groups.

This year the Bureau was selected by the New Jersey Department of Health to utilize an Intern under the Health Education Intern Program. Under this program carefully selected college students are assigned to positions where they will receive on-the-job training from a qualified professional. During the Summer the Health Intern completed an Audiometric Screening project on sixty nine pre school children and over one hundred and thirty High School students who were enrolled in the Seton Hall University Head Start Program.

HIGH-LIGHTS OF YEAR INCLUDE

The Fifth Annual Health Education Work-Shop.

In cooperation with the New Jersey State Health Department the Bureau assisted in the planning and the conducting of a Health Work-Shop at the Mutual Benefit Life Insurance Company. There, many community groups and interested consumers of the City's health facilities were given the opportunity to discuss the problems and Health needs of the community.

"Pop Goes the Measles" Program.

Again working with many community groups and the New Jersey Department of Health, The Bureau took part in the planning and programming of all-day Measles Vaccine Program. From at least twenty sites throughout the City 6,797 children between the ages of 1 to 10 years were immunized against Measles. In the fall, another Measles Program was initiated in the evening at various Area Boards and other sites throughout the city, 811 children were immunized with the Measles Vaccine.

Multi-Phasic Screening Program

A health testing program sponsored by the Division of Health in cooperation with the United Community Corporation was started in January. A series of free health tests were given in neighborhood centers throughout the city. During the summer, working in conjunction with the Head Start Project, we examined 599 parents of the Head Start children.

Another useful feature of the Multi-Phasic Program was the referring for the Pap Smear Clinic, all females over the age of 16 years. The purpose of the referral was to detect at the earliest stage possible any form of uterine cancer.

TOTAL PEOPLE SCREENED		7,225
I	Diabetic Screening	
A.	Total Screened	6,810
1.	Screened-Negative	6,544
2.	Screened-Positive	296
B.	Final Diagnosis of Patients Screened Positive	
1.	Newly diagnosed diabetics	24
2.	Potential diabetics	10
3.	Known diabetics	62
4.	Negative for diabetes	83
5.	Diagnosis not determined	115*
II	Chest X rayed	
A.	Total Screened	6,440
1.	Abnormal X rays	342
2.	Abnormal Cardiac	74
3.	Total Abnormal X-rays	304
4.	Total Negative X-rays	6,136
III	Serology	
A.	Total Screened	6,750
1.	Positive Serology	179
2.	Total Negative Serology	6,576
IV.	Eye Examination	
A.	Total Screened	7,150
1.	Patients needing refractions	1,013
2.	Patients needing complete eye examinations	395
3.	Final Diagnosis	
a.	Glaucoma	20
b.	Possible Glaucoma	22
c.	Cataract	68
d.	Possible Cataract	5
e.	Pterygium	25
f.	Conjunctivitis	24
g.	Macular and or Myopic Degeneration	16
h.	Other Eye Diseases	70
i.	Refraction	25

4.	Diagnosis Not Determined	30*
V. Hypertension		
A.	Total Screened	7,175
1.	Total Abnormal Blood Pressure	603
2.	Patients under supervision of private physician	452
3.	Patients under supervision of Clinics	41
4.	Diagnosed-Not Determined	110*
5.	Total Patients with Normal Blood Pressure	6,572
VI. Heart and Lung		
A.	Total Screened	7,175
1.	Total Abnormality on Heart and Lung Examinations	86
2.	Previously known	12
3.	Patients under supervision of private physicians	37
4.	Patients under supervision of clinic	5
5.	Diagnosed-Not Determined	32*

Explanation of Follow-up

- A. Abnormal X-rays Patients in this category are referred to the Chest Disease Bureau for follow-up.
- B. Abnormal Cardiac X-rays Patients in this category are referred to their private physician or the Division of Health for follow-up.
- C. Positive Serology Patients in this category are referred to the Venereal Disease Bureau for follow-up.
- D. Complete Eye Examination Patients in this category are referred to the Eye Clinic at the New Jersey College of Medicine and Dentistry or to their private physicians.

* Diagnosis Not Determined Determination can not be made on these cases due to lack of cooperation on the part of patients and private physicians.

BUREAU OF VITAL STATISTICS

Nathan Hershkowitz, SUPERVISOR

This Bureau received the following Certificates as follows

	BIRTHS	DEATHS	MARRIAGES
1967	10,676	4,678	3,869
1968	10,168	4,669	3, " "

We prepare reference cards for each, micro-film all of them, send the Original Certificates to the State Department of Vital Statistics, Bureau of Births and Deaths. Certificates are also sent to B.M. contractors and hospitals. Individual Birth Certificates prepared in accord with State Statutes and Out Of-Town Births and Deaths must also be sent to the City of Residence.

Burial permits are issued and many old records are re-issued by request. This is often a slow procedure. Prior to the issuance of a new permit, a record of the copy and books must be checked with the Bureau of Vital Statistics, of which will require a full day's work. The Bureau charges \$1.00 for each record, even one old record.

The requests for old records such as births, deaths or marriages, is in addition to the work outlined above. The record charges per certificate is \$24.149.00 as compared with \$63.08.00 for "667" tickets. These tickets are \$3.00 per card and \$1.00 for each burial or removal permit.

Many free records, in addition to the above are supplied for Veterans, School Certification and CHI and Agencies, and many free records. Corrections, additions, Certificates must be made.

GENERAL MORTALITY

The following tables show the estimated population, crude deaths and death rate, as well as adjusted deaths and death rate since 1943. The census for 1960, however indicates a total of only 405,000, a reduction of 38,000 since the 1950 census. We feel certain the census takers missed a great many, especially in the over crowded sections of the City. We have adjusted our estimates in the following table for each of the past years to comply with the Official Census totals.

Year	Population in 1,000's	Crude & Adjusted Deaths			
		Crude Deaths	Crude Rate	Adjust. Deaths	Ad. Rate
1943	440	5,523	12.6	5,043	11.5
1948	445	5,222	11.7	4,382	9.8
1953	432	5,387	12.5	4,389	10.0
1958	413	4,971	12.0	3,950	9.5
1963	410	5,338	13.0	4,167	10.2
1964	410	5,194	12.7	4,040	9.9
1965	410	5,052	12.3	3,971	9.7
1966	410	4,867	11.9	3,770	9.2
1967	410	4,678	11.4	3,653	8.7
1968	410	4,669	11.4	3,552	8.7

PRINCIPAL CAUSES OF DEATH

The major causes of Newark deaths, including non-residents and the known deaths of Newarkers dying from T.B. rec. or in City Town Sanatoria were as follows:

	1960	1961	1962	1963	1964	1965	1966	1967	1968
Organic Heart Dis.	2,035	2,132	2,119	2,093	2,067	2,039	2,049	1,825	1,915
Cancer	716	746	729	736	771	763	722	695	658
Apoplexy	520	567	529	612	496	460	478	464	574
Congenital Disease	325	366	313	392	364	321	294	350	310
Pneu. & Resp. Disease	360	299	381	403	402	366	253	254	31
Bright's Dis. & Neph.	167	176	179	163	102	90	101	97	177
Tuberculosis	40	52	52	46	48	42	34	36	29

TOTAL DEATHS BY AGE GROUPS 1923 - 1968

Year	Total	Under	1 and	2 and	Total	5-14	15-24	25-44	45-64	Over 65
	Deaths	1 Yr.	Und. 1	Und. 2	Und. 5	Und. 5				
1923	5221	756	153	136	1055	196	305	872	1503	1290
1933	5128	356	68	96	520	141	215	914	1775	1563
1943	5702	367	24	44	435	66	148	660	2074	2313
1953	5387	364	24	33	421	39	55	493	1906	2473
1963	5338	468	34	39	541	41	84	466	1571	2635
1966	4867	389	28	44	461	37	82	422	1508	2357
1967	4678	412	19	25	456	31	103	433	1349	2306
1968	4669	374	23	27	424	44	117	455	1442	2187

OTHER INTERESTING HEALTH TRENDS 1923 - 1968

Year	Deaths	Infant	Diarr.	T.B.	Bright's	Organic			
	Under	Mortal-	Birth	Deaths	T.B.	Dis.	Heart Deaths		
	1 Yr.	ity	Rate	Und.	5yrs.	Deaths	Rate		
1923	756	68.0	11,110	25.3	133	406	92.5	340	727
1933	356	45.1	7,897	17.6	18	388	85.8	228	1091
1943	367	30.9	11,856	26.9	15	294	66.8	276	1975
1953	364	25.8	14,116	32.1	6	97	22.0	241	1963
1963	468	34.9	13,427	32.7	14	46	11.2	163	2093
1966	389	33.8	11,493	28.0	8	34	8.3	101	2049
1967	412	38.6	10,676	26.0	5	36	8.8	97	1825
1968	374	36.8	10,168	24.8	1	28	6.8	107	1915

DEATHS UNDER ONE YEAR - BY CAUSES OF DEATH 1923 - 1968

Year	Meas-	Bron-	Pneu-	Menin-	Diar-	Other	Cont.	Congenital	All	TOTAL
	les	chitis	monia	gitis	rhea	Diseases		Premature	Other	
1923	15	32	94	10	105	21		376	103	756
1933	2	2	75	2	18	10		191	56	356
1943	0	1	41	5	14	5		255	46	367
1953	0	3	23	2	6	1		297	32	364
1963	0	0	23	6	13	0		387	39	468
1966	0	0	32	5	3	1		294	3	338
1967	0	1	26	3	4	1		350	27	412
1968	0	0	42	5	1	0		300	26	374

STILL-BIRTHS AND MATERNAL DEATHS

Year	Puerperal	Maternal Mort.	Births	Still-Births	Still-Births
	Deaths	per 1,000 Deliveries			per 1,000 Deliveries
1966	10	0.8	11,493	212	18.5
1967	4	0.3	10,676	237	22.2
1968	2	0.2	10,168	212	20.8

INFANT DEATHS (1 YEAR) BY CAUSE AND CODE NUMBERAMONG NEWARK RESIDENTS

<u>DISEASE</u>	<u>CODE NUMBER</u>	<u>1967</u>	<u>1968</u>
Septicemia	768	0	0
Bronchitis	502	1	0
Stomach	541.0	0	0
Cirrhosis of Liver	581	0	0
Epidemic Meningitis	057	0	0
Cong. Heart Disease	754	3	0
Simple Meningitis	340	9	5
Apoplexy - Brain Soft.	760.5	0	0
Other Respiratory Disease	522	0	0
Pneumonia (Other)	763.5	13	21
Pneumonia (Broncho)	763	12	16
Diarrhoea (Under 5 Years)	571	4	0
Hernia & Int. Obstruction	560.5	1	0
Cong. Debility & Malf.	790.1	298	251
Whooping Cough	056	1	0
Accident	N933	15	16
Homicide	E982	0	0
Ill-Defined	795	10	10
All Other	780	0	0
<hr/> TOTALS....		358	319

INFANT MORTALITY RATES (FIRST DAY - FIRST MONTH - FIRST YEAR, ETC.)

Year	Under	Next	Under	Over 1 Week	Total Under 1 Mo.	Over 1 Mo.	Under 1 Yr.	Total Under 1 Yr.
	1 Day	6 Days	1 Week	Under 1 Mo.				
1937	9.7	6.7	16.3	5.5	21.8	15.7	37.5	
1943	9.2	8.3	17.6	3.8	21.5	9.4	30.9	
1949	8.6	10.0	18.6	3.4	21.9	7.1	29.0	
1954	11.2	7.2	18.3	3.2	21.5	7.1	28.6	
1959	12.0	10.8	22.8	3.5	26.4	9.5	35.9	
1963	15.8	10.3	26.1	2.7	28.7	6.2	34.9	
1966	10.4	10.8	21.2	3.4	24.5	9.3	33.8	
1967	17.7	9.2	26.9	3.5	30.3	8.2	38.6	
1968	14.7	8.5	23.1	3.7	26.8	9.9	36.8	

TOTAL DEATHS OCCURRING IN NEWARK AMONG NEWARK RESIDENTSBY RACE AND SEX19681967

<u>Total Deaths</u>	<u>Rate</u>	<u>RACE</u>			<u>SEX</u>		<u>Total Deaths</u>	<u>Rate</u>	<u>RACE</u>			<u>SEX</u>				
		<u>W.</u>	<u>N.W.</u>	<u>M.</u>	<u>F.</u>				<u>W.</u>	<u>N.W.</u>	<u>M.</u>	<u>F.</u>				
Non-Res. 1,117	2.7	991	126	636	481		Non-Res. 1,025	2.5	940	85	607	418				
Resident 3,552	8.7	1963	1589	2043	1509		Resident 3,653	8.9	2049	1604	2086	1567				
<u>TOTALS</u>		<u>4,669</u>	<u>11.4</u>	<u>2954</u>	<u>1715</u>	<u>2679</u>	<u>1990</u>	<u>TOTALS</u>			<u>4,678</u>	<u>11.4</u>	<u>2980</u>	<u>1689</u>	<u>2693</u>	<u>1985</u>

DEATHS BY AGE GROUPS OCCURRING IN NEWARK AMONG NEWARK RESIDENTS

<u>Year</u>	<u>Und. 5 Yrs.</u>	<u>5 - 14</u>	<u>15 - 24</u>	<u>25 - 44</u>	<u>45 - 64</u>	<u>65 and over</u>	<u>Total Deaths</u>
1967	396	25	82	397	1,004	1,749	3,653
1968	363	38	100	377	1,091	1,583	3,552

LIVE BIRTHS IN NEWARK19681967

BIRTHS	WHITE				NON-WHITE				BIRTHS	WHITE				NON-WHITE			
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE		MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
Non-Res.	2,028**	872	786	187	183	Non-Res.	2,158**	953	903	162	140						
Res.	8,140***	1,298	1,315	2,777	2,750	Res.	8,518***	1,432	1,351	2858	2877						
RATES*	15.9	16.1	34.1	33.8	RATES*					16.8	15.9	33.6	33.6				
TOTALS	10,168	2,170	2,101	2,964	2,933	TOTALS	10,676	2,385	2,254	3,020	3,017						

NOTE: * Rates figured Newark Resident-Births in NEWARK.

** Non-Resident Births in NEWARK.

*** Newark Resident Births in NEWARK.

PLACE OF BIRTHS IN NEWARK19681967

Births	Births			Doctors			Births	Births			Doctors		
	At Hosp.	At Home	Others	At Hosp.	At Home	Others		at Hosp.	at Home	Others	at Hosp.	at Home	Others
Non-Res.	2,028**	2,026	0	2	Non-Res.	2,158**	2,158	0	0	0			
Res.	8,140***	8,038	48	54	Res.	8,518***	8,394	33	91	91			
TOTALS	10,168	10,064	48	56	TOTALS	10,676	10,552	33	91	91			

NOTE: **Non-Resident Births in NEWARK.

***NEWARK RESIDENT BIRTHS IN NEWARK.

BIRTHS BY WARDS IN NEWARK AMONG RESIDENTS
SEX AND COLOR

WARDS	TOTAL BIRTHS	1968				TOTAL BIRTHS	1967			
		WHITE MALE	WHITE FEM.	NON-WHITE MALE	NON-WHITE FEM.		WHITE MALE	WHITE FEM.	NON-WHITE MALE	NON-WHITE FEM.
North	1,639	568	568	270	233	1,641	570	551	228	292
East	1,319	400	411	249	259	1,649	442	402	399	406
West	1,206	181	177	412	436	851	180	180	258	204
South	2,197	86	91	1010	1010	2,218	117	118	994	989
Central	1,779	63	68	836	812	2,159	94	100	979	986
TOTALS	8,140	1,298	1,315	2,777	2,750	8,518	1,432	1,351	2,858	2,877

STILLBIRTHSOCCURRING IN NEWARK AMONG NEWARK RESIDENTS

<u>CAUSE</u>	<u>1967</u>	<u>1968</u>
Prematurity	56	55
Atelectasis	17	23
Congenital Malf.	45	25
Abruptio Placenta	54	51
Anoxia	23	39
Unknown	<u>42</u>	<u>19</u>
TOTALS	<u>237</u>	<u>212</u>

INFANT DEATHS UNDER 1 YEAR OF AGEOCCURRING IN NEWARK AMONG NEWARK RESIDENTS

<u>YEAR</u>	<u>TOTAL</u>	<u>UNDER</u>	<u>UNDER</u>	<u>UNDER</u>	<u>UNDER</u>
	<u>DEATHS</u>	<u>1 YEAR</u>	<u>1 MONTH</u>	<u>1 WEEK</u>	<u>1 DAY</u>
1967	358	74	23	88	173
1968	319	88	24	68	139

INFANT MORTALITY RATES UNDER 1 YEAR OF AGEOCCURRING IN NEWARK AMONG NEWARK RESIDENTS

<u>YEAR</u>	<u>TOTAL</u>	<u>RATES</u>	<u>RATES</u>	<u>RATES</u>	<u>RATES</u>
	<u>RATE</u>	<u>UND. 1 YEAR</u>	<u>UND. 1 MONTH</u>	<u>UNDER</u>	<u>UNDER</u>
1967	42.0	8.7	2.7	10.3	20.3
1968	39.2	10.8	2.9	8.4	17.1

ILLEGITIMATE BIRTHSBIRTHS OCCURRING IN NEWARK AMONG NEWARK RESIDENTS AND SHOWING PLACE OF BIRTH.

MONTH	1968			1967				
	TOTAL	BORN AT HOSPI.	BORN AT HOME	BORN ELSEWHERE	TOTAL	BORN AT HOSPI.	BORN AT HOME	BORN ELSEWHERE
January	230	226	4	0	183	178	4	1
February	217	215	2	0	207	205	2	0
March	221	216	5	0	171	168	2	1
April	185	185	0	0	193	189	4	0
May	204	196	8	0	213	209	3	1
June	191	190	1	0	200	200	0	0
July	197	196	1	0	245	240	5	0
August	217	215	2	0	201	198	3	0
September	207	205	2	0	218	215	3	0
October	216	214	2	0	203	202	0	1
November	193	191	0	2	170	169	1	0
December	195	195	0	0	242	239	3	0
TOTALS..	2,473	2,444	27	2	2,446	2,412	30	4

ILLEGITIMATE BIRTHS IN NEWARK AMONG NEWARK RESIDENTS BY WARD

MONTH	1968						1967					
	TOTAL	N.	E.	W.	S.	C.	TOTAL	N.	E.	W.	S.	C.
January	230	31	25	34	75	65	183	40	29	25	30	59
February	217	31	29	31	64	62	207	33	22	29	27	66
March	221	52	17	26	68	58	171	33	13	24	56	45
April	185	38	14	25	61	47	193	38	20	24	48	63
May	204	32	26	37	58	51	213	47	14	26	78	48
June	191	37	18	22	61	53	200	40	26	17	55	62
July	197	36	22	27	65	47	245	34	25	38	64	84
August	217	38	16	30	72	61	201	38	17	30	67	49
September	207	38	28	26	61	54	218	47	23	21	63	64
October	216	41	13	39	61	62	203	41	23	29	49	61
November	193	47	18	25	62	41	170	37	17	18	43	55
December	195	34	19	38	60	44	242	38	29	42	62	71

TOTALS.. 2,473 455 245 360 768 645 2,446 466 259 323 671 727

Rates per
1,000 live
Births 30.4 5.6 3.0 4.4 9.4 7.9 28.7 5.5 3.0 3.8 7.9 8.5

Rates per
1,000 Pop. 6.0 1.1 0.6 0.9 1.9 1.6 5.9 1.1 0.6 0.8 1.6 1.8

YEAR	BIRTHS	NON-RES.	NEWARK RES.
1967	10,676	2,158	8,518
1968	10,168	2,028	8,140

N. - North Ward
E. - East Ward
W. - West Ward
S. - South Ward
C. - Central Ward

COMMUNICABLE DISEASE DEATHS BY CAUSE AND CODE NUMBER
OCURRED IN NEWARK AMONG NEWARK RESIDENTS

<u>DISEASE</u>	<u>INTERNATIONAL CODE NUMBER</u>	<u>1967</u>	<u>1968</u>
Influenza	480	0	0
Epidemic Meningitis	057	2	2
Other Epidemic & Inf. Dis.	082	0	0
Tuberculosis (Lung)	002	33	28
Tuberculosis Meningitis	010	0	0
Tuberculosis (Other Forms)	011-019	3	0
Pneumonia, Other	492 & 493	84	111
Pneumonia, Broncho	491	95	94
Diarrhoea (Under 5 Yrs.)	571	5	0
Whooping Cough	056	1	0
 TOTALS...		223	235

COMMUNICABLE DISEASE DEATHSCAUSE OF DEATHS AND RATESOCCURRING IN NEWARK AMONG NEWARK RESIDENTS

<u>DISEASE</u>	<u>1968</u>		<u>1967</u>	
	<u>DEATHS</u>	<u>RATE</u>	<u>DEATHS</u>	<u>RATE</u>
Influenza	0	0	0	0
Epidemic Meningitis	2	0.5	2	0.5
Other Epidemic Diseases	0	0	0	0
Tuberculosis of Lungs	28	6.8	33	8.0
Tuberculosis (Meningitis)	0	0	0	0
Tuberculosis (Other Forms)	0	0	3	0.7
Pneumonia (Other)	111	27.1	68	16.6
Broncho Pneumonia	94	22.9	79	19.3
Diarrhoea (Under 5 Yrs.)	0	0	5	1.2
Whooping Cough	0	0	1	0.2
TOTALS....	235	57.3	191	46.6

CAUSES OF DEATH OCCURRING IN NEWARK AMONG NEWARK RESIDENTS AND RATES

<u>CAUSE</u>	<u>1968</u>	<u>1967</u>			
	<u>DEATHS</u>	<u>RATES</u>		<u>DEATHS</u>	<u>RATES</u>
Diabetes	25	6.1		25	6.1
Leukemia	12	2.9		21	5.1
Septicemia	16	3.9		21	5.1
Pulm. Emb. & Inf.	44	10.7		39	9.5
Hepatitis	25	6.1		31	7.6
Peritonitis	6	1.5		11	2.7
Epidemic Meningitis	2	0.5		2	0.5
Other Epidemic Diseases	-	-		-	-
Tuberculosis of Lungs	28	6.8		33	8.0
Tuberculosis Meningitis	-	-		-	-
Other Tuberculosis	-	-		3	0.7
Cancer	412	100.5		485	118.3
Simple Meningitis	12	2.9		11	2.7
Apoplexy	276	67.3		387	94.4
Organic Heart	1493	364.1		1415	345.1
Bronchitis	5	1.2		4	1.0
Pneumonia (Other)	111	27.1		68	16.6
Pneumonia (Broncho)	94	22.9		79	19.3
Other Respiratory	95	23.2		54	13.2
Stomach	14	3.4		9	2.2
Diarrhoea (Under 5 Years)	-	-		5	1.2
Appendicitis	3	0.7		2	0.5
Hernia Int. Obst.	22	5.4		25	6.1
Cirrhosis of Liver	61	14.9		49	12.0
Bright's Disease	79	19.3		74	18.0
Puerperal Septicemia	2	0.5		-	-
Other Puerperal	-	-		4	1.0
Congenital Debility	253	61.7		298	72.7
Accident	169	41.2		181	44.1
Homicide	94	22.9		83	20.2
Suicide	22	5.4		26	6.3
Ill-Defined	101	24.6		92	22.4
All Others	76	18.5		113	27.6
 TOTALS ...	 3,552	 8.7		 3,653	 8.9

ACCIDENTAL DEATHS IN NEWARK AMONG NEWARK RESIDENTS BY CAUSE AND AGE GROUP

1968

1967

ENVIRONMENTAL SANITATION

EDWARD L. SMITH, CHIEF INSPECTOR
JOSEPH J. SMITH, ASSISTANT CHIEF INSPECTOR

The Sanitary Bureau maintains a staff of fifteen inspectors, all motorized to investigate complaints of a sanitary nature and to detect sanitary conditions by enforcement of the Sanitary and Housing Codes.

This group also regulates rodents and vermin extermination and supervises fumigation with dangerous gases in homes, stores, factories, freight cars and ships.

The following are typical unsanitary conditions investigated by the Inspectors:

	1967	1968		1967	1968
Heat	810	1,300	Sidewalls, Floors		
Insanitary Housekeeping	187	124	and Ceilings	1,694	1,971
Overcrowding	28	116	Rodents & Vermin	1,981	2,118
Garbage and Refuse	1,898	1,757	Sleeping in Cellars	25	94
Animal Nuisances	5,042	4,102	Weeds	237	216

SANITATION

Hearings Held	276	363	Notices Served	16,975	12,983
Cases Prosecuted	681	532	Abatements	16,437	15,602
Convictions	456	584	Complaints Un-justified		
Total Inspections	52,001	48,974		1,455	1,318
Complaints Investigated	16,924	14,089			
Nuisances Confirmed	23,075	21,598			

Under the Rent Control Ordinance thirty six complaints were investigated and brought before the Health Officer to determine whether the buildings were sub-standard or standard, of these cases thirty have been abated, one has been turned in for court action for failure to comply and the balance were given an extension of time in order to complete the work.

WEED CONTROL

This program is carried out by one of our maintenance men and a man from the Department of Parks and Grounds. A truck is assigned to these men and they spray all vacant lots and other areas containing ragweed, poison ivy etc. This program starts in July and finishes after Labor Day. In 1967 two hundred and thirty seven areas were sprayed and in 1968, two-hundred and sixteen. The materials used included chemicals destroying both ragweed and poison ivy.

LICENSES AND PERMITS

After inspection and approval, the following permits have been granted:

Ice Trucks and Depots	23	19	Refuse Trucks	44	36
Keeping Fowl	35	37	Animal Permits	1	1

Environmental Sanitation (cont'd)

FUMIGATIONS CONTROL

All dangerous gas and other extermination procedures are limited to licensed fumigators who must pass a written examination before they can use public inspection. Every fumigation conducted by these fumigators is supervised by an Inspector from the Sanitary Bureau. The following fumigations and exterminations supervised during the year were:

	1967	1968		1967	1968
Rummage Sales	38	25	City & Private		
Factory & Brewery	6	3	Dumps	42	39
Second Hand & Used			Demolitions	384	1,226
Clothing	24	18			

RABIES CONTROL

All Animal Bites are investigated by the Inspectors and animals placed under quarantine for a period of ten days from date of bite. At expiration of quarantine a re-inspection is made and if animal is found to be in good health a release from quarantine is issued.

Bited Investigated	2,803	3,042	Cats	40	26
Dogs	2,702	2,950	Other Animals	61	66

LEAD POISONING

Seventy five complaints were received from the Bureau of Child Hygiene compared with two-hundred and forty three last year relative to peeling paint in homes occupied by children under six years of age. Inspections were made, samples of paint taken and submitted to the Health Department Laboratory for analysis. Written notices were served on the owners of the properties to scrape the walls and woodwork and to repaint with paint containing less than one percent of lead.

Environmental San. (contd)

Rabies Investigations

<u>Report of Investigations of Suspected Rabid Dogs</u>	<u>1967</u>	<u>1968</u>
No. of Persons Bitten by Dogs	2702	2950
No. of Persons Bitten by Cats	40	26
No. of Persons Bitten by Horses or Other Animals	61	66
Total No. of Persons Bitten and Cases Investigated	2803	3042
No. of Dogs and Cats (Bitten)	0	0
No. of Dogs and Cats (Exposed to Infection)	0	0
No. of Dogs and Cats sent to Humane Society (Observation)	131	77
No. of Dogs and Cats sent to Humane Society (Destroyed)	93	23
No. of Persons Given Pasteur Treatment	0	1

Re-Inspections, Final Inspections & Examinations

No. of Original Inspections	2803	3042
No. of Re-Inspections	0	0
No. of Final Inspections	2701	3020
TOTAL NO. OF INSPECTIONS	5504	5970
	Negative	23 13
Dog Brains Examined from Newark	Positive	0 0
	Negative	19 14
Other Animal Brains Examined from Newark Positive	0 0	
	Negative	0 0
Dogs' Brains Examined Out-Of-Town	Positive	0 0
	Negative	0 0
Other Animal Brains Examined Out-Of-Town Positive	0 0	
	Total -	42 27
Hours in Court	17	11

DOG CONTROL

Thomas P. Dunn, Supervisor

Prior to 1954, the picking up of stray dogs (all dogs in public must be on a leash) was carried out by the Humane Society. In 1954 this arrangement was changed and greatly improved. The Health Division secured two dog ambulances of its own, operated by four Dog Wardens (Dog Catchers). The Humane Society is paid approximately \$25,000.00 per year to supply, housing and feeding for all animals picked up by us, or brought in by owners to be disposed of, etc. The Humane Society also picks up sick and injured animals on the City streets.

The Shelter Contract, as well as the cost of trucks, equipment, and expenses other than salaries are more than covered by the Dog License Fees (See Financial Report Page).

	1968	1967
Dog Licenses issued \$4.00 each	8653	9004
"Seeing Eye" Dog Licenses (Free)	4	5
Pet Shop Licenses \$10 each	8	6
Kennel Licenses \$10 each	1	2
Dogs Redeemed by Owners	95	180

The City pays the State 50¢ out of each license fee and the State provides free rabies vaccine. The City offers free rabies vaccination for each licensed dog, and pays the veterinarian a special fee of \$1.50 each for vaccination. Only by popularizing the annual vaccination of dogs can we feel confident that our present freedom from rabies will continue. It is now 17 years since rabies occurred here, but in 1946 we had 34 rabid dogs, and 21 persons underwent Pasteur Treatment. The compulsory leashing of dogs (all years) was started at that time. Under the free vaccination arrangement 3499 Newark dogs were vaccinated this year.

This ambulance during the year picked up 1,401 unleashed dogs and also picked up 1,005 stray cats. Owners of dogs picked up may redeem them from the Shelter upon payment of a \$5.00 fee to the City in lieu of Court appearances. Dogs are destroyed if not picked up within a reasonable time. The Dog Control supplies Sanitation Division with one truck to pick up dead animals on the street. This truck picked up 1,135 dead cats and 1,594 dead dogs, and 88 other dead animals.

FINANCIAL REPORT

DOG CONTROL

<u>1968</u>	<u>1967</u>		<u>1967</u>	<u>1968</u>
8653	9004	Cash Receipts - Paid Licenses	36,016.00	34,612.00
4	5	Seeing Eye Dogs	00.00	00.00
95	180	Dogs Redeemed	900.00	455.00
8	6	Pet Shop Licenses	60.00	80.00
1	2	Kennel Licenses	20.00	10.00
			36,996.00	35,157.00
Money sent to State			4,502.00	4,326.50
Cash on Hand			32,494.00	30,830.50

No. of Animals picked up on Streets by Sanitation Department

	<u>1967</u>	<u>1968</u>
Dead Cats	5367	1133
Dead Dogs	4537	1594
Total	9904	2727

No. of Animals picked up by Dog Control

Dogs	1492	1401
Cats	1310	1005
Total	2802	2406

	<u>1967</u>	<u>1968</u>
No. of Dogs Redeemed	180	95
No. of Licenses issued up to 12/31	9009	8657
No. of Seeing Eye Dogs	5	4
No. of Kennel Licenses	2	1
No. of Pet Shop Licenses	6	8
No. of Dogs Vaccinated	3687	3499
No. of Complaints answered on live animals	2970	2942
No. of Calls on Dead Animals	1177	1228

FOOD & DRUG INSPECTION

Michael J. Carson, Chief Inspector
Maria Mores, Acting Ass't Chief Inspector

The Food and Drug Bureau is responsible for the inspection and supervision of all establishments wherein food, drugs, and or cosmetics are prepared, processed, stored, transported and or sold. The Bureau enforces Federal and State laws as well as all local ordinances to ensure that all such articles, in every phase of their preparation for sale, comply with existing regulations.

The Bureau's program is divided into two areas of endeavor - local inspection and dairy inspection.

Dairy inspection.

There are seven (7) inspectors assigned exclusively to this phase of the Food and Drug Bureau's control program. These men are responsible for the quality of milk and milk products shipped into the City of Newark, and they inspect all sources of milk and milk products from the dairies supplying same throughout our entire milkshed which includes both a state and out of state supplies.

As in the past, this dairy inspection work has been carried on in a reciprocal inspection program with the New Jersey State Department of Health and has been in effect prior to be the saving and economical measure as it eliminates duplication of inspection.

Another inspector carries on a daily program of routine sampling from stores, depots, plants, vending machines, and institutions, of the various types of dairy products for bacteriological and chemical analyses.

Local inspection

Thirteen (13) inspectors work locally. Their duties include the supervision of all food, drug, and cosmetic operations within assigned areas.

In the local program, the Bureau also cooperates with the New Jersey State Department of Health in another reciprocal inspection program, one dealing with catering establishments.

During the past year the locally assigned inspectors continued a program to route no samples, (a) utensil swabbings collected from eating and drinking establishments to determine the efficiency of washing and sanitizing, (b) ice cream and oyster sampling and miscellaneous foods as the situation called for, collected for laboratory analysis to determine compliance with legal requirements.

Where articles of food or drugs are found to be, or suspected of being, adulterated or misbranded, same are embargoed and detained until such time as the labeling is corrected or until such time as the articles are reported as being fit by the laboratory. Any specimens found adulterated or unfit are subsequently condemned and destroyed.

In 1968, our representatives destroyed large amounts of various food, drugs, etc., primarily in cases involving fire and related damage.

The past year resulted in a change of personnel due to a resignation, transfers, and three retirements, notably of our former Chief Mr. David F. Morgan. It is the intention of the current supervisor to continue the complete Food and Drug program as efficiently as is possible and to include also any new phase of control work as may be required.

(See following page for Statistics)

<u>MILK & DAIRY PROGRAM</u>	<u>Inspected</u>		<u>Reinspected</u>		<u>Total</u>		<u>Excluded</u>	
	<u>1967</u>	<u>1968</u>	<u>1967</u>	<u>1968</u>	<u>1967</u>	<u>1968</u>	<u>1967</u>	<u>1968</u>
Pasteurising Plants	181	158	11	6	192	164	0	2
Receiving Plants	250	237	19	8	269	245	0	0
Dairies	8,028	7,554	531	459	8,559	8,013	159	100
Ice Cream Plants, Counter Freezers, Mobile Units, Depots, Other	45	77	0	0	45	77	0	0
TOTALS	8,504	8,026	561	473	9,065	8,499	159	102

<u>DAIRY PRODUCTS SAMPLING</u>	<u>Bacteriological</u>		<u>Chemical</u>		<u>Total</u>	
	<u>1967</u>	<u>1968</u>	<u>1967</u>	<u>1968</u>	<u>1967</u>	<u>1968</u>
Milk & Cream Samples	3,255	2,650	3,101	2,535	6,356	5,185
Ice Cream, Other Frozen Conf.	155	105	155	105	310	210
TOTALS	3,410	2,755	3,256	2,640	6,666	5,395

<u>CITY INSPECTIONS</u>	<u>1967</u>	<u>1968</u>
Total City Inspections & Rein.	13,093	12,213
Complaints Investigated	321	508
Notices Served	1,111	1,056
Notices Abated	1,008	961
Embargo Notices	35	42
Suspected Food Pais'g.	15	10 (referred to Epidemiologist)
Utensil Swab Samples	802	875
Misc. Samples Taken	361	131

<u>MILK LICENSES</u>	<u>1967</u>	<u>1968</u>
Issued (Stores, Dealers, Vending Machines, Depots)	1,434	1,299
Total Rempts	\$3,020	\$2,830

VETERINARY MEAT INSPECTION

JOSEPH H. HEARL
Supv. Chief Meat Inspector

JOHN J. DEVINE, V. M. D.
Chief Veterinarian

This Bureau is responsible for the inspection of meat and meat products, poultry and fish, as to wholesomeness and fitness for food. We inspect abattoirs, meat processing and poultry slaughterhouses, and wholesale and retail plant outlets and stores. We also inspect the commissaries of restaurants, lunch rooms, meat and fish trucks and loading platforms for poultry, and meat freight cars. We inspect all deliveries of meat, fish and poultry at all City institutions. This Bureau also conducts the lectures given at the Food Handler school, a series one (1) hour daily, four(4) days per week, mornings (10:00 to 11:00 a.m.) afternoons (3:00 to 4:00 p.m.) to all food service workers making application for a foodhandler's certificate. This work is carried out by a staff of trained meat inspectors and veterinarians with State licenses.

The City of Newark, N.J. Meat Inspection Service is identified with some sixty five (65) meat processing establishments licensed by this Bureau.

Following are work statistics for the years 1967 & 1968.

Veterinary (con't)

ABATTOIR INSPECTIONS

1.	Inspections and reinspections	89
2.	Out-of-town inspections	24

WHOLESALE MEATS AND DRESSED POULTRY INSPECTIONS

1.	Inspections and reinspections	1769
	Wholesale Meat Dealers	1623
	Loading Platform Inspections	146
	Commissary & Restaurant Inspections	8
	Condemnations	157,521

FOOD CONTROL WORK AT CITY INSTITUTIONS

Beef	32,145
Pork	9,842
Lamb	11,800
Veal	13,133
Provisions	7,128
Fish	5,880
Clams	588 gals.
Oysters	-
Shrimp	3,100
Poultry	62,096
Scallops	2,190
Inspections	129
Institutional inspections	114
Ice Box inspections	114

MISCELLANEOUS ACTIVITIES

Notices Served	143
Notices abated	129
Complaints Investigated	86
Samples Taken for Analysis	III
Court Cases	12
Fines	\$ 500
Special Details	518

Veterinary (con't)

WHOLESALE LIVE POULTRY INSPECTIONS

1.	Inspections and reinspections	903
	Wholesale Live Poultry inspections and reinspections	3,451,390 lbs.
	truckloads of Live Poultry inspected	561
2.	Condemnations	62,532

PROVISION MANUFACTURING PLANTS

1.	Inspections and reinspections	1608
	Bologna Kitchens inspections and reinspections	982
	Frozen Food Estab. inspections and reinspections	67
	Provision Jobbers inspections and reinspections	982
	Clam House inspections and reinspections	48
	Casing Estab. inspections and reinspections	28
	Pork Head Boning inspections and reinspections	43
	Provisions inspected and stamped	780,000 lbs.

RETAIL ESTABLISHMENTS

Public Markets	inspections and reinspections	2122
Butcher Shops	inspections and reinspections	4825
Poultry Stores	inspections and reinspections	591
Smoked Fish Estab.	inspections and reinspections	19
Fish Stores	inspections and reinspections	690
Pet Shops	inspections and reinspections	78
Refrigeration Plants	inspections and reinspections	67

MISC. CONDEMNATIONS IN RETAIL STORES

82,315 lbs.

1967

Veterinary Meat Inspection

1968Inspections & Reinspections (12,554)

Abattoirs	40
Wholesale Meat & Dressed Poultry	1,591
Loading Platforms	92
Commissaries	2
Refrigeration Plants	52
Wholesale Live Poultry	859
Truckloads of Poultry	619
Wholesale Fish	27
Provision Mfg. Plants	1,317
Retail Establishments	7,763
City Institutions & Ice Boxes	<u>192</u>
 TOTAL	12,554

Condemnations 186,125 lbs. of poultry, meat and fish products.

Approved over 205,794 lbs. of meat, poultry and seafood in our City Institutions inspections.

Samples for analysis	117
Complaints investigated	59
Notices served	74
Abatements	42
Court Cases (Fines \$150.00)	9

License Fees	
Poultry Slaughterhouse	
Meat Jobbers	2,255.00
Meat Plants	4,100.00
Live Poultry	<u>10.00</u>
 TOTAL	\$ 6,365.00

Inspections & Reinspections (8,825)

Abattoirs	89
Wholesale Meat & Dressed Poultry	1,769
Loading Platforms	146
Commissaries	8
Refrigeration Plants	67
Wholesale Live Poultry	903
Truckloads of Poultry	561
Wholesale Fish	46
Provision Mfg. Plants	982
Retail Establishments	4,125
City Institutions & Ice Boxes	<u>129</u>
 TOTAL	8,825

Condemnations 186,125 lbs. of poultry, meat and fish products.

Approved over 205,794 lbs. of meat, poultry and seafood in our City Institutions inspections.

Samples for analysis	111
Complaints investigated	86
Notices served	134
Abatements	96
Court Cases (Fines \$150.00)	12

License Fees	\$130.
Poultry Slaughterhouse	3,125
Meat Jobbers	2,275
Meat Plants	4,300
Live Poultry	<u>10</u>

TOTAL \$10,279

CONTAGIOUS DISEASES

Joseph W. Gardam, M.D., Physician-in-Charge
 William S. Jennings, Chief Inspector
 Alfred D. Giordano, Ass't Chief Inspector

With the discontinuance of reporting of the usual childhood contagious diseases, several years ago, this Bureau has had merely a token record of these diseases. This year, such as Measles (163), Mumps (81), Vincent's Angina (24) one cannot draw any conclusions from these figures because we realize that this is in no way, is truly representative of the situation in this city of the actual frequency of these diseases. Our reporting cards do not even carry spaces for these. However, of the 34 diseases listed on our reporting cards only 8 have been reported this last year. Five of this group 8 are in the diarrhoeal class and naturally they have caused as much concern because they are actually on the increase. Active follow up with cultures of all family contacts have given us many secondary cases in families and this no doubt accounts for some of the numerical increase.

TETANUS, POLIOMYELITIS, SMALLPOX and DIPHTHERIA are again notable by being absent in our city and this speaks well for our continued protective activity coupled with that of the school system in maintaining our high level of immunity. This Bureau follows up all newborns by mailing prompt immunization during the first year of life, and with the school system requiring partial immunization before a child may be admitted (and then prompt completion when not done) we manage to keep our immunity level at a high point. Children moving into our area from out of State or neighboring communities must be immunized prior to admission to our school system. With continued stress on this routine immunization (DPT SP POLIO) and the addition of Measles program followed by Influenza Immunization campaign this fall and winter shows again the work of this Bureau is now primarily protection for all ages but especially for pre-school age group. Some of the uncommon diseases that have occurred deserve special comment.

MALARIA One case occurred in a Pakistani Seaman, was found and treated at Port Newark, only to leave the city when his ship sailed. We have been fortunate in that no cases have occurred in Veterans returning from Vietnam. This possibility will continue as long as we have troops in that area.

OPHTHALMIA NEONATORUM Five cases have been reported and this is the usual pattern for the year. It is slightly higher than 1967 but less than other years. With the increase of gonococcal infections in the city we may have many more cases in the next few years.

MENINGOCOCCIC MENINGITIS Twelve cases of this dread disease occurred during the year. This being virtually the normal incidence for this city when the figures are compared with previous years.

ROCKY MOUNTAIN SPOTTED FEVER One case reported this being very unusual. An 11 year old negro boy who had been visiting in So. Carolina became ill while traveling to Newark by car with his father on July 4, 1968. He was admitted and treated at Beth Israel Hospital where he had a positive Weil-Felix reaction 1:320. This was verified in the State Health Department Laboratory. These findings eventually were positive for Proteus agglutination and complement fixation for Rocky Mountain Spotted Fever. A history of multiple mosquito bites (ticks???) while in So. Carolina was obtained. Recovery after six weeks hospitalization occurred.

FOOD POISONING Eight cases occurred in one family and were traced to spoiled food. Recovery occurred in a short time with adequate treatment.

HEPATITIS Both serum and infectious types have been occurring and have shown a 50% increase this year over the preceding year making this the most prevalent since 1961. To date nothing has been developed to prevent this disease and no specific medication has been found for treatment. Isolation, bed rest, diet and supportive measures are still the only available. Nothing new has been added to prevent the disease in immediate contacts. The long incubation period makes it essential to maintain continued observation of family contacts to locate secondary cases. Gamma Globulin is still not available for routine usage. Its time of protection is only six weeks and the incubation period of this disease is frequently much longer. In certain cases Gamma Globulin may be obtained from the State Health Department when application is made by the family physician and circumstances warrant its usage in the opinion of the State Health Officer.

INFLUENZA As usual, definite immunization programs were set up and carried out to protect as many of our essential and Senior Citizens as possible. This year more people were treated than ever before. The special Hong Kong variant ²A type of serum was not available until late in December and then in only limited quantities. However we did use ¹On a ¹Wh appox 1000 for protection. Newark had its share of real active cases as well as the United States. No actual figures are available because of the lack of reporting but we feel that we had more deaths from this source.

DIARRHOEAL DISEASES As a group all of these have been running heavy and have become a real problem. **Typhoid Fever** one case occurred in a 63 year old woman in the Central Ward in July. She was admitted to Alexian Brothers Hospital in Elizabeth and expired the same day of admission. Fortunately no contacts developed from this disease.

PARATYPHOID No case occurred during the year of 1968.

AMOEBOIC DYSENTERY Five cases, three of whom were in one family and all occurring in children (ages 3-4-7-8-17) occurred and were evidently imported to this country. These cases were in Puerto Ricans who had recently arrived in this country.

Contagious Diseases (cont'd)

DIARRHOEA OF THE NEWBORN Due to improved laboratory measures, no case of this entity occurred but many children in the first year of life were proven to be infected with Pathogenic E. Coli organism. We have investigated and followed up 110 cases of this disease against 85 in the year of 1967 almost 33% more than that year.

SHIGELLOSIS (BACILLARY DYSENTERY) Seventy-one cases, all but five of which were in young children occurred this year. In many families multiple cases occurred having spread through faulty hygiene and sanitation. Naturally this proves the need for education along the line of household sanitation and education has become an essential part of the work of this Bureau.

SALMONELLOSIS Ninety cases of this disease against seventy three in 1967 means virtually a 33% increase for the year. What has been said about shigellosis applies here and again stresses the need for household sanitation. Many of these cases were in adults but the Childhood period again had the bulk of the cases. Improper cooking is recognized as the major source of infection in these cases. Chickens, turkeys, eggs have all been incriminated as the original vector in the infection. Stool cultures have been an invaluable aid in controlling these outbreaks. It is essential that follow up specimens be taken and that three consecutive negatives be obtained before the patient may be released. Treatment must be active with potent modern antibiotics proper dosage, for the age of the infected individual. About ten sero-types out of a possible 1100 have been recognized in our area and proven by the usual laboratory techniques.

HEPATITIS CASES REPORTED TO NEWARK DIVISION OF HEALTH 239 CASES

AGE GROUP

0 to 4	5 Cases	Males	163
5	9	Females	76
10	14	Newark Cases:	222
15	19	Non-Residents	17
20	24	Treated in Hospitals.	210
25	34	Treated at Home	29
35 - 44	12	Infectious Hepatitis:	176
55	54	Serum Hepatitis	63
55 - 64:	9	Non-Residents treated in	16
65	74	Newark Hospitals	
85 - 91:	2		

COMBINED DIPHTHERIA PERTUSSIS- WHOOPING COUGH VACCINATIONS

YEAR	PRIVATE DOCTORS	HEALTH CLINICS	TOTAL	YEAR	HEALTH CLINICS	PRIVATE DOCTORS	TOTAL
1960	1179	6928	8107	1960	6036	1044	7080
1961	791	6604	7395	1961	4893	678	5571
1962	838	9698	10536	1962	5840	753	6593
1963	930	14226	15136	1963	5612	716	6328
1964	579	12702	13286	1964	5533	388	5921
1965	273	14527	14800	1965	3592	199	3791
1966	271	15188	15459	1966	4246	217	4563
1967	305	20696	21001	1967	4175	210	4385
1968	446	18962	19408	1968	4324	147	4471

Contagious Dis (contd)

MORBIDITY REPORT 1958 - 1968

DISEASES	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	NORM
Amebiasis	0	0	0	2	2	1	1	2	0	0	5	1
Brucellosis	1	1	0	0	1	0	0	0	0	0	0	0
Diarrhea of Newborn	-	-	-	-	-	2*	0	1	0	0	0	0
Diphtheria	0	0	0	0	0	0	0	0	0	0	0	0
Epilepsy	71	58	52	48	117	223	164	81	74	61	15	71
Hepatitis	21	29	39	293	267	143	194	118	158	161	239	158
Lead Poisoning	-	-	-	-	-	15*	77	102	76	37	13	13
Malaria	0	0	0	0	0	0	6	2	0	0	1	0
Measles	2188	5332	2683	4305	2556	3547	2495	1626	684	104	163	2188
Mening. Meningitis	14	7	13	10	10	10	7	10	15	12	12	10
Mumps												81
												Reportable as of 10-1-67
Dphth. Neonat.	4	3	5	9	4	8	7	10	19	2	5	5
Path. E. Coli	-	-	-	-	-	-	-	-	31*	85	110	0
Poliomyelitis	54	10	5	0	0	0	0	0	0	0	0	0
Salmonellosis	0	0	0	0	0	15	20	25	77	63	91	5
Shigellosis	-	-	-	-	-	-	1	15	24	39	71	0
Tetanus	1	0	1	0	1	0	0	0	0	1	0	0
Trichinosis	1	2	0	2	2	0	2	0	0	0	0	0
Typhoid Fever	0	0	0	0	0	0	0	2	2	1	1	0
Tuberculosis	402	367	343	372	332	341	299	355	360	324	355	324

CULTURE COLLECTORS REPORT

Vinc. Ang.	Cultures	Stutnum Jars	Wassermanns	Neisser	Misc.	Total
Collected	23	18	190	14036	3332	239
Delivered	117	30	586	8353	3026	596
Stations Vis.						5108

BUREAU ACTIVITIES

Inspectors Home Visits - Investigations	848
Wrong Addresses	63
Sp. Ass'gn. & Complaints Investigated	105
Reinspections	465
Specimens Collected	889
Supplies Delivered	978
Water Samples (Swimming pools, etc.)	428

TOTAL VISITS 3776

*Reportable as of Jan. 1 of current year.

VENEREL DISEASES

N. V. Del Deo, M. D.,
Chief of Skin and
Venereal Disease

This report is a record of the incidence of venereal disease in the City of Newark.

The infectious syphilis patients seen in our clinic during 1968 showed a marked decrease while gonorrhea has been on a steady rise.

The passage of legislation in 1968 permitting minors to come to our clinic without parental consent, has been a great aid in combatting the diseases because of this bill, we can now treat more minors than ever before.

The expansion of our clinic hours to mornings and afternoons five (5) days a week has warranted a full time physician and three trained investigators plus the two we already have.

To prevent the spread of gonorrhea our investigators interview male patients and bring to treatment their source of infection. We are doing more complete follow-ups to attempt proof of cure in both male and female patients.

The treatment at our skin clinic has been on the rise for the past two years.

VENEREAL DISEASE BUREAUCLINIC REPORT

<u>SYPHILIS</u>	<u>1966</u>	<u>1967</u>	<u>1968</u>
Total New Patients	757	624	338
Total Patients Visits	11095	10475	4492
Treatments Given	4427	3460	2161

Investigations Syphilis			
Source of Infection	1121	1913	669

<u>GONORRHEA</u>			
New Patients - Male	1656	2350	3269
New Patients - Female	612	968	976
Total New Patients	2268	3318	4245

Patients treated - Male	2289	3365	4820
Patients treated - Female	813	862	857
Total Gc Patients treated	3102	4227	5677

Investigations Gonorrhea			
Source of Infection			1567

<u>SEXUAL CONTACTS OF PATIENTS</u>			
<u>Syphilis & Gonorrhea</u>			
Named	1535	1913	2278
Found and Examined	885	1071	1136
Found Infected	408	507	580
Primary	49	56	59
Secondary	103	106	57
Early Latent	139	109	92
Total of Early Syphilis	291	271	208

<u>SKIN CLINIC</u>			
New Cases	1886	2012	1793
Treatments	4775	5096	5132

CHEST DISEASES

John H. Alcamo, M.D.
T B Control Director

In 1967 we had 1,609 patients, a number far below 1966. We improved in 1968 when we attended 2,003 patients, especially during the latter half of the year. Clinical examinations increased from 9,091 to 10,727 and are still rising. The new cases increased from 298 in 1967 to 331 in 1968.* The increase in cases is in part due to the new administrative controls set up in 1968.

Many cases had to be turned over to the Legal department for prosecution, because of patients non cooperative attitude. The legal procedure should be shortened somehow, because there is too much delay before a positive sputum case can be placed under medical control through legal means. However, if the legal procedure is prolonged, the positive sputum patients at large will have infected numerous people through contact while we wait for the long drawn legal routine. Thus, of course, prepares many infected tuberculosis cases for next year and thus we are always facing a losing battle.

The 1967 mortality rate was 8.78 and in 1968 it was reduced to 6.8. There was a normal rise in the morbidity rate from 78.8 in 1967 to 80.7 in 1968, because of improvement in case finding.

More hours have been added to our clinics. We now have afternoon clinics every day, from 1:00 P.M. to 3:00 P.M., and one evening clinic, from 4:00 P.M. to 6:00 P.M., every Tuesday. Last year we had only three afternoon clinics each week. Of course, our morning clinics are the same 9:00 A.M. to 12:00 Noon daily.

School Mantoux testing and reports to the Health Department have been neglected in 1967 but this year we are getting better response. More help will be needed to follow the great number of positive Mantoux and their contacts. These positive Mantoux could be the TB cases of tomorrow, if they are not intercepted.

SUMMATION

We saw many gains in many areas in 1968. Among them the following

The number of TB deaths decreased from 36 in 1967 to 28 in 1968, our clinic examinations increased from 9,091 in 1967 to 10,727 in 1968, our Control Bureau, under new leadership, succeeded in bringing many delinquents in for follow-up.

Finally, we feel that the much needed salary adjustments will assist us in recruiting and retaining top echelon employees. And for 1969 we anticipate greater gains in the Chest Disease Bureau, because of assuming greater responsibilities and obligations.

Considerable credit for recent improvement in case finding must go to the employees of the Epidemiology Division.

*Newark residents only.

CHEST DISEASE (cont'd)DIVISIONAL WORK TOTALSPatients and Contacts Under Supervision

Patients - 2,003	Contacts (New) 738	Total 2,741
Clinic Examinations - Tuberculosis, Adults & Children- - - - -	10, 7	
Clinic Examinations - Cardiac- - - - -	1,209	
X-rays - 4x5 - 2,043	14x17 - 4,119 - - - - -	6,164
Mantoux Tests - Clinic - - - - -	- - - - -	1,619
Sputum Examinations - Cultures - - - - -	- - - - -	1,442
Sputum Examinations - Spread - - - - -	- - - - -	1,442
Electrocardiograms- - - - -	- - - - -	1,442
Mercuhydrin Injections - Clinic - - - - -	- - - - -	12
Patients Admitted to Verona Sanatorium- - - - -	- - - - -	48
Patients Admitted to Glen Gardner - - - - -	- - - - -	1
Patients Sent to Hospital - - - - -	- - - - -	3
Tine Tests - Home - Done by Bureau of Public Health Nursing - - - - -	- - - - -	30
September through December, 1968	- - - - -	
Commitments, Verona Sanatorium and N. J. State hospital - - - - -	- - - - -	6
Streptomycin Injections - Clinic - - - - -	- - - - -	1,424
Streptomycin Injections - Home - Done by Bureau of Public Health Nursing. - September thru December	- - - - -	79
Court Cases	- - - - -	2

TUBERCULOSIS MORTALITY AND MOBILITY RATE (ALL FORMS)

YEAR	POPULATION	NO. DEATHS	CASES REPORTED	MORTALITY	MOBILITY
1925	453,000	378	872	83.4	192.5
1930	440,000	445	1,000	101.1	227.3
1935	455,000	316	654	69.5	143.7
1940	429,000	309	586	71.9	136.6
1945	443,000	247	495	55.8	111.7
1950	443,000	209	526	47.2	117.2
1955	443,000	68	490	15.3	110.6
1960	405,000	40	343	9.9	84.7
1961	405,000	52	372	12.8	91.8
1962	410,000	52	332	12.7	80.2
1963	410,000	46	341	11.2	83.2
1964	410,000	48	299	11.7	70.7
1965	410,000	42	355	10.2	87.6
1966	410,000	35	360	8.5	87.8
1967	410,000	36	323	8.78	78.7
1968	410,000	28	336	6.8	80.7

CHEST DISEASE BUREAU - 1968

TUBERCULOSIS DEATHS BY SEX, AGE AND RACE - 1968

Race	Under 1	1 - 4	5 - 9	10 - 14	15-19	20-24	25-34	35-44	45-54	55-64	65-74	75 & over
	M - F	M - F	M - F	M - F	M - F	M - F	M - F	M - F	M - F	M - F	M - F	M - F
Total	28	0	1	0	0	0	3	9	6	7	2	2
White	3	-	-	-	-	-	-	-	1	-	2	-
Non-White	25	-	1	-	-	-	-	2	1	5	4	1

TUBERCULOSIS DEATHS BY AGE GROUP - 1961 - 1968 (8 Year Total)

	Under 1	1 - 19 Yrs.	20-24 Yrs.	25-44 Yrs.	45-54 Yrs.	55-64 Yrs.	64-74 Yrs.	75 & over
1961	0	3	2	24	6	7	5	5
1962	0	1	1	19	12	10	8	1
1963	0	1	1	19	7	10	7	1
1964	0	1	2	12	8	13	7	5
1965	0	0	1	9	11	10	8	3
1966	0	1	0	16	5	8	4	1
1967	0	0	1	13	6	10	3	3
1968	0	1	0	12	6	7	2	0
Totals	0	8	8	124	61	75	44	19

(Deaths) - Lapse of time after Report of Case - 1968

No. Cases Reported Prior to Death	Within One Year	13	46.42
1 - 2 Years	1	3.57	
3 - 4 Years	2	7.14	
4 Years and Over	8	28.56	
After Death	4	14.28	
Total Deaths	28		

Number of T. B. Cases Reported - 336. This includes 5 Non-Residents.

CHEST DISEASE (cont'd)REPORTED CASES - 1968

<u>MONTH</u>	<u>WARDS</u>	<u>NORTH</u>	<u>EAST</u>	<u>SOUTH</u>	<u>WEST</u>	<u>CENTRAL</u>
JANUARY		3	9	3	7	15
FEBRUARY		3	3	4	7	5
MARCH		4	8	14	3	11
APRIL		4	10	9	5	15
MAY		3	3	6	5	8
JUNE		2	5	14	7	10
JULY		1	6	8	4	4
AUGUST		1	7	9	5	13
SEPTEMBER		0	5	6	8	3
OCTOBER		3	2	2	5	5
NOVEMBER		2	4	2	2	5
DECEMBER		<u>2</u>	<u>2</u>	<u>3</u>	<u>3</u>	<u>4</u>
		28	64	80	61	98

TOTAL T. B. CASES FOR THE YEAR - 336. THIS INCLUDES 5 NON-RESIDENTS.

REPORTED CASES

<u>YEARS</u>	85 and Over												
	1	5	10	15	20	25	35	45	55	65	75	85 and Over	
<u>Under</u>	1	4	9	14	19	24	34	44	54	64	74	84	
Male	2	5	4	3	9	15	35	60	40	39	10	3	1
Female	1	3	4	6	2	10	25	25	17	12	2	3	0
<u>TOTALS</u>	3	8	8	9	11	25	60	85	57	51	12	6	1

TOTAL - 336

Chest Dis. (cont'd)

REPORTED CASES - 1968REPORTED CASES OF TUBERCULOSIS BY WARDS

NORTH WARD	28
EAST WARD	64
SOUTH WARD	80
WEST WARD	61
CENTRAL WARD	98
	<u>331</u>
NON-RESIDENTS	5
TOTAL	<u>336</u>

Cases Reported by:

Newark City Hospital	142
Chest Clinic - Div. of Health	72
Private Physicians	49
Hospitals	36
Veterans Administration	2
Essex County Penitentiary	12
Verona Sanatorium	18
Health Depts. Out of Town	3
N. J. Reformatory	1
Essex County Hospital - Overbrook	<u>1</u>
	<u>336</u>

Pulmonary Cases Reported	295
Cases - Pulmonary & Non-Pulmonary	4
Non-Pulmonary Cases as Follows (total 37)	
Glandular	13
Peritoneal	2
Miliary	4
Bone	2
Laryngeal	0
GU Tract	3
Meningeal	2
Pleurisy with Effusion	<u>11</u>
TOTAL	<u>336</u>

Chest Dis. (cont'd)

CARDIAC CLINIC - 1968

CLASSIFICATION OF CARDIAC CASES

HYPERTENSION	625
ARTERIOSCLEROSIS	97
PERI CARDITIS	2
LUETIC	10
PULMONARY	23
ANGINA	4
CONGENITAL	1
NO HEART DISEASE	236
UNKNOWN HEART DISEASE	46
IDIOPATHIC	3
EMPHYSEMA	1
HYPERTENSIVE HEART DISEASE	82
RHEUMATIC	32
PAROXYSMAL TACHYCARDIA	1
PERICARDIAL EFFUSION	1
THYROID	7
CON. PULMONALE	1
CORONARY	17
C.V.A.	2
METASTATIC CA	1
UNDIAGNOSED MANIFESTATIONS	17
TOTAL	1,209

During the latter half of 1968 we have screened all cases in the Cardiac Clinic, and those sent in from other clinics for cardiac evaluation. We have transferred known cardiacs to our State Cardiac Clinic, where they may receive more specialized, individual definitive care, outside of regular clinic hours.

CITY DISPENSARY

Michael Fratantuno, M.D., Asst. Health Officer
 Violet Padula, R.N., Supervisor of Public Health Nurses.

The City of New York provides, through its Health Division, medical care treatments and medications without charge to its medically indigent and relief clients. Home medical care is also provided through a staff of physicians who are on call to render such service. These physicians are paid from monies allocated for this purpose in the Relief Budget and the Health Division Budget.

During 1968, 15,581 home calls were made by physicians at the rate of \$5.00 per day visit and \$7.50 per night visit.

The workers in the Social Service Department determine the eligibility of all patients who apply for clinic care. Patients who are receiving relief benefits, social security and those classified as medically indigent are accepted routinely.

Total treatments for 1968 averaged 50,169 for 24,420 patients.

The pharmacy in addition to dispensing free medication prescribed by Clinic physicians, also distributes materials necessary for immunization. The number of prescriptions filled by the pharmacy in 1968 equalled 67,381.

The number of clinic treatments listed here do not include those of the Chest, Dental or Venereal Disease Bureau which are listed elsewhere in this report.

CLINIC TREATMENTS

	1967	1968		1967	1968
Allergy	2264	2380	Diphth. Tet. & Wh.	4648	3417
Chiropody	692	602	Diphth. Toxoid, Adult	1398	1238
Eye	1208	1263	Diphth. & Tet. Med.	2763	2631
Gastro-Intestinal	316	392	Sabin Polio	7430	5924
Medical	8029	9453	Measles	137	280
Metabolic	1609	1905	Vaccinations	2848	3005
Neuropsychiatric	508	-	Insulin & Other Inj.	845	846
Orthopedic	482	823	Blood Tests	4657	4962
Pediatric	2315	2355			
Pre-employment	784	747	X-ray Chest 4X5 NCD	3732	8503
Rectal	53	37	X-ray Chest 14X17 NCD	1274	6454
Rehabilitation	285	2075	Misc x-ray Body Work	1625	644
Skin	5096	5082	Total x-rays	6631	15601
Surgical	863	714			

	1967	1968
Free Treatments	48,401	50,169
Individual patients	29,285	24,420
Total prescriptions	75,531	67,381
Doctor Home Calls	2,021	1,581

CITY DISPENSARY (2)

Once again the Newark Health Division sponsored an Influenza Immunization program for senior citizens and city employees. The Public Health Nurses in the City Dispensary were responsible for the equipment and assisting the physician. Approximately 3,222 injections were given.

During the year 1968 the City Dispensary received approximately 425 requests for medical information on our patients from all types of agencies. The City Dispensary nurses are responsible for the medical information that is written on these forms. It may be necessary to obtain information from several clinic charts before a record is completed.

<u>DOMESTIC CLINIC</u>	<u>Total</u>	<u>Positive</u>	<u>Negative</u>	<u>Suspicious</u>
Examined at Clinic	917			
Blood Tests Taken	789	19	770	
Vaginal Smears Taken	528		528	
Vincent's Angina Smears Taken	39	15	24	
Chest X-Rays Taken	774	1	749	
Temporary Cards Issued - Tuberculosis	22			
Temporary Cards Issued - Vincent's Angina	-			
Regular Cards Issued	537			
Boarding Home License	12			
Irvington Nursing Home	49			
Foster Parents	91			
Chr III	114			
Taxi Drivers	3			
Beauticians	3			
Barbers	1			

CITY DISPENSARY PHARMACY

Chief Pharmacist
Ass't Chief Pharmacist

Laurence J. Jilave, PHG, R.P.
Nicholas Schumbracco, PHG, R.P.

PRESCRIPTIONS

The Health and Welfare City Dispensary Pharmacy dispensed approximately 67,398 prescriptions for the year 1968. These prescriptions are filled for indigent patients who are treated at the City Dispensary and for welfare patients who are unable to attend our clinics and are treated by physicians in the patient's home.

ACTIVITIES OF THE PHARMACY

Many preparations which are practical and economical to prepare are prepared in bulk by the pharmacists. The preparation of medications and the packaging of supplies to Parochial Schools, Child Hygiene Stations and other school stations are a part of the routine pharmacy work. Records are also maintained numbering into the many thousands, for the distribution of insulin and free State Biologicals to private physicians. Since 1968 due to the many new programs sponsored by the State, it has been necessary to order and dispense supplies as well as biologicals for their use such as TEAM, Multi Phase, etc. It has also become necessary to have one or two pharmacists go to Ivy Haven to dispense medications used in the Wards one day a week.

FUNCTIONS OF THE PHARMACY

The functions of the Pharmacy relate to the ordering and receiving of surgical supplies, drugs, surgical equipment, free State Biologicals, antibiotics, narcotics and also alcohol for manufacturing purpose and clinical use. Also raw materials for prescription compounding use.

An accurate record is kept as to date of order and date of receiving from Vendor, when free biologicals are received and lot numbers and expiration dates. Concurrent records are kept as to dates and quantities dispensed to clinics, physicians, Parochial Schools, and Child Hygiene stations. Records are sent to State Department of Health as to amounts of each biological dispensed from the Pharmacy.

After merchandise ordered is received the Purchase Orders are processed with receiving paper work for payment. A complete record of all drugs and surgical supplies and surgical equipment is kept in the Pharmacy office.

A check as to dated drugs and other staple items are constantly scrutinized and these items are exchanged for new drugs if out dated. Records are also maintained numbering into the hundreds for the distribution of Insulin and other diabetic drugs. These records are up to date and accurate because it is vital information so that the patient does not take an overdosage of these drugs.

An inventory is taken so to enable the Chief Pharmacist to exchange drugs not used for drugs that are now being dispensed regularly as well as out-dated drugs.

Drug salesmen are interviewed and professional discussions are held periodically relating to new drugs. Many times the Technical Service Department of our contract Vendors have to be called for information not contained in the brochure with the drug.

The Pharmacy maintains at all times a well stocked supply of modern up-to-date drugs, antibiotics, flu vaccine, polio vaccine as well as measles virus vaccine.

PAROCHIAL SCHOOLS

Michael J. Fratantuno, M.D.,
Asst. Health Officer,

William P. Wheaton, R.N., B.S.,
Public Health Nurse Supervisor

Helen Desmond, R.N., B.S.
Asst. Public Health Nurse Supervisor,

Helen Breitstadt, A.B.,
Social Case Worker

During the year 1968, the Bureau of Parochial Schools provided health service to 14,700 elementary and secondary school children enrolled in 25 elementary schools, four high schools, one two-year Commercial school and one Special Education School.

The objective of the Bureau of Parochial Schools is to provide optimal health that is physical, psychological, emotional and sociological, for each school child. The responsibility for maintaining and providing health in all respects to the school child is divided between the school physician and the school nurse, with the nurse assuming the role of follow-up with the parents, school Principals and the social case worker.

The staff of the Bureau of Parochial Schools consists of five physicians, one Supervisor Public Health Nurse, one Assistant Public Health Nurse Supervisor and seventeen Public Health nurses. There was a shortage of personnel during the year due to illness and leaves of absence for educational purposes. In spite of this shortage of personnel the Bureau of Parochial Schools was able to provide the necessary services to meet the needs of the school children.

The annual programs provided by the Bureau of Parochial Schools are as follows:

- 1 Complete physical examination by the school physician on children in grades 1, 4, 7, 9, 11, all new children and follow-up on old health problems.
- 2 Nurses' health appraisals on all school children in elementary school and the 9th and 11th grades in high school. This type of examination includes height, weight, vision screening, posture, teeth, mouth, throat, skin, speech and personal hygiene.
- 3 Audiometric testing by the school nurse on children in grades 1, 3, 5, 7, 9, 11 and all new students.
- 4 Tuberculin Tine testing on all children in grades 1, 5, 9, 12 and all new students not previously Tuberculin tested.
- 5 Smallpox revaccination of all children in grades 5 and 12.
- 6 Diphtheria-Tetanus booster injection on all children in grades 8 and 12, and children 10 years old and under who have not had a Diphtheria-Tetanus booster within four years.
- 7 Measles vaccination to all children ten years of age and under who have not had the Measles vaccination or who have not had the disease.
- 8 Dental Survey by Dental Bureau on grades 1, 2, 3 and 4.
- 9 Oral Sabin, Polio Trivalent booster is given to all new students who have completed their primary series of Oral Sabin Polio, but who never had a Booster Oral Sabin Polio.

A cumulative health record which contains pertinent data for each child is kept all through the school life of the child from kindergarten or 1st grade to the 12th grade.

Parents of children found to have any type of defect are not lied by the school nurse if such findings. Parents are requested to seek professional attention for treatment or correction of defects as soon as possible.

Children in need of psychological evaluations are referred to the Mt. Carmel Guild Special Services by the School Principal. However the school nurse and social case worker cooperate with the Principal and the Mt. Carmel Guild Special Services in referring and following through on the special problems.

Defective hearing and speech problems are referred by the nurse to the School Principal who in turn refers the children to the Speech and Hearing Center of the Mt. Carmel Guild.

Children with vision defects picked up by the nurse during vision screening are referred to the parents. If the parents are unable to afford private care, the school nurse refers the children to the Eye Clinic at the Division of Health.

Children with dental defects whose parents can not afford the services of private dentists are referred by the school nurse to the Dental Clinic at the Division of Health. Preventive Orthodontic work is also done at the Dental Clinic.

There were 3,226 Tuberculin Tine Tests done on the children during the School Year. Of that number, 55 were Positive Reactors. The Positive Reactors were referred for attention by their private physician. The children who did not have a private physician were referred to the Chest Bureau of the Division of Health for follow-up work.

Our social case worker has helped many families to solve social, psychological and economic problems during the year. A summary of social services is given on the following pages.

SUMMARY OF PAROCHIAL SCHOOL HEALTH ACTIVITIES

TYPE OF ACTIVITY	1966	1967	1968
Nurses Health Appraisals	16,593	14,189	13,962*
Professional attention by private physicians	4,172	3,938	2,991
Professional attention by clinic physicians	546	623	554
Professional attention by private dentists	1,385	1,303	940
Professional attention by clinic dentists	1,372	981	1,324
School Physicians examinations	6,123	5,633	6,071
Nurses classroom inspections of children	1,306	577	1,665
Nurses classroom talks	560	654	979
Nurses Telephone Calls	11,433	11,283	11,512
Nurses Home Visits	58	66	50
School exclusions by nurses	3,392	2,524	2,410
Number first aids given by nurses	7,664	8,086	9,867
Number office conferences held by nurses with parents, teachers, children and others	39,832	40,861	39,250
Audiometric Screening Tests done by nurses	6,728	9,078	7,452
Hearing Defects found	69	49	36
Visions Done by nurses	16,373	14,937	13,459
Vision Defects found	2,190	2,372	2,412
Smallpox Vaccinations	94	2,107	2,626
Diphtheria-Tetanus Series Inj Completed	101	264	264
Diphtheria-Tetanus Booster Injections	3,448	2,131	2,933
Measles Vaccine	348	296	367
Tuberculin Tests (Times)	5,226	5,347	3,226
Positive Tuberculin Tests	106	104	55
Sabin Trivalent Anti-Polio Vaccine	9,866	2,378	1,701
Asian Flu Injections	62	84	125

*Includes Teeth, Posture, Nose and Throat, Hair and Scalp, Skin, Speech Behavior and Others.

Type of Defect	1966		1967		1968	
	Number Found	Number Corrected	Number Found	Number Corrected	Number Found	Number Corrected
Dental	4,812	2,693	5,450	2,242	4,022	2,214
Vision	2,210	1,409	2,611	1,642	2,412	1,407
Cardiac	170	127	New 137 Old 57	New 87 Old 63**	New 98 Old 89	New 71 Old 58
Nutrition	297	63	403	72	521	55
Orthopedic or Posture	73	97 **	130	155 **	62	157
Ear Hearing	67	48	161	60	136	67
* Other Illnesses	3,673	2,588	1,912	2,194 **	1,158	1,956

* Includes Nose and Throat, Skin, Personal Hygiene, and all other conditions not included in above listings.

** Includes Defects previously found- which were corrected or remedied this year.

INTERPRETATION OF ANNUAL REPORT

SOCIAL SERVICE PAROCHIAL SCHOOL BUREAU

I. SOURCE OF DATA

- A This report encompasses all cases referred by and accepted from the Social Service Division of the Parochial School Bureau, January 2, 1968 through December 31, 1968. These cases have been used for referral sources, reason for referrals, age and sex distribution of children. The statistical tables and information contained herein reflect the above mentioned categories.
- B Cases carried over from the previous year have been included in Procedures and Social Service rendered.
- C Cases carried over from the previous year and closed during the twelve month period of this report have been included in the Analysis of Closed Cases.

II. INTERPRETATION OF DATA

- A The objective and function of the Social Service Division is to assist Parochial School children in their total development. The focus is on all of those influences which tend to or actually do impede the child's growth and development. Such hindrances encompass a wide range of psycho-social cases including social, cultural, economic, physical, neurological and psychological factors.

The methodology is analytical, directive and supportive in assisting clients in initiating meaningful and effective changes in family goals.

- B The procedure is individual case work study, primarily by interview with the child and the parent, or in the absence of the parent, with the surrogate parent. Also included, are interviews with other informed or interested parties and collateral conferences with Parochial School authorities, the Mt. Carmel Guild Special Services and other Community Social Agencies and Institutions.

- C All cases received and accepted by this Division were investigated within the frame-work of our jurisdiction. Information was accumulated from every pertinent source. The social situation was assessed, the problem was identified, and then an evaluation was made with an objective and altruistic approach by the Parochial School Social Worker. Self-help was encouraged and skill was applied to determine how the family was functioning through the Inter-Group relationship which affects the personality development of the child. The problems necessitate an awareness and a sensitivity to the families' emotional and material needs.

The child and/or the parent was referred to the social Agency as required to assure the child a viable future with an opportunity to self-improve, and thereby make a meaningful contribution to the family and the community.

Most cases were referred to and serviced by the Mt. Carmel Guild Special Services our primary resource area where professional assistance was extended as required, and remedial measures were taken with all of the ramifications. Medical problems were referred to the family physician, or to the Division of Health Clinic, when clients were found to be medically indigent.

In numerous cases, more serious problems evolved, other than the ones for which the cases were originally referred, and said problems were found to be primary or contributory factors. Therefore more persons were assisted than is indicated in this report, since the family was treated as a unit and clients were apprised of the dynamics of the Community and the Neighborhood Service Agencies, also the viability of using all aspects of said Agencies services.

D. The majority of cases were referred by the Parochial School Principals or the nurses. Other cases were referred by the Mt. Carmel Guild.

Individual case history files are kept on all referrals, complete with copies of correspondence and other pertinent data. All information obtained in case work studies is held strictly confidential by this Bureau.

III SUMMARY

A Of the ninety cases accepted during the twelve month period, over 33% were referred due to Parental Indifference and Neglect, 20% for Behavioral Problems, 13% for Economic Deficiency over 25% for Multiple Problems, i.e. more than one major problem existing in the family, and over 7% of the cases were referred for problems other than the above-mentioned. Examples of such types of cases in this category are Disruptive home situations Handicapped children or parents, Misunderstanding due to language barrier, and in the ethnic groups, a lack of knowledge of public facilities available to them. Also included were referrals in a Socio-Cultural category where children were referred to the Newark Junior Museum Art Course Workshop and to Celers Studio Workshop, where musical lessons were provided through a Federal funded program.

IV CLOSED CASES

A Eighty four cases were closed during the twelve-month period. These cases were classified into six categories Psychological 22, Multiple 20, Physical 14, Economic Deficiency-13, Miscellaneous-9, Socio-Cultural-6.

Sixty-three cases were resolved, 11 cases were minimized, and ten cases were unresolved.

B The resolving of the eighty four cases was accomplished by Interpretive Guidance Moral and Emotional Support, and Referrals to Other Agencies, also, by the cooperation of the parent and the child.

A social diagnostic process was employed by detecting the problems origin. This was related to the client, whereby a strength of relationship between the case worker and the client was established. Hope and confidence was inspired by illuminating and enhancing the client's self-esteem and by changing the family goals in order to provide a solution to the existing problems.

Many cases were resolved through the facilities of the Mt. Carmel Guild Special Services, also by worker impressing upon the parent, the urgent need for the child to keep medical and dental appointments, or to obtain eyeglasses when indicated.

C Eight of the twelve cases due to economic deficiency were resolved when the parents were referred to the proper Agency for employment according to their potential, and skill. Four problems were solved when clients were referred and accepted by Welfare Agencies.

- D Of the eleven cases minimized, counsellng was extended with the purpose of explaining to the family, the importance of compliance with medical recommendations and or proper hygienic care of the child or the home. The parents in this category evinced minimal cooperation, thus the problems were only minimized
- E Of the ten cases unresolved, three families moved out of the community. In four other instances, the children were transferred to Public School, in which case the social worker in that school was apprised of the child's problems by this Agency. In the three remaining cases, the parents were resistive to the School Authorities and also to Social Service intervention

This is a twelve month report. Parochial School case work has been under the jurisdiction of present case worker for the entire Statistical Year

DIVISION OF PUBLIC HEALTH PAROCHIAL SCHOOL BUREAU
ANNUAL SUMMARY OF SOCIAL SERVICES
JANUARY 2, 1968 THROUGH DECEMBER 31, 1968

A INTAKE

Referrals Received	90
Referrals Accepted	90
Referrals Rejected	0

B CASE LOAD COUNT

New Cases Added	84
Cases Re-opened	6
Total Cases Added	90
Cases Carried Over from Previous Year	26
Total Cases Open During Year	116
Cases Closed During Year	84
Cases on Books End of Year	32

C PROCEDURES

1 Interviews	383
With Parents	177
With Children	69
With Other Interested and Informed Parties	137
Visits	273
To Homes	187
To Hospitals, Clinics and Schools	86
2 Conferences	180
Social Agencies	69
Clinics	18
Inter-Department	7
Pastors	5
Schools.	32
Principals	32
Teachers	12
Nurses	37
3 Correspondence	570
Written Correspondence	276
Telephone Calls	294

D. SERVICES RENDERED (To the child and/or member of the family:)

1. Referred to Other Agencies:	149
Mt.Carmel Guild, Diagnostic and Guidance Institute (Psych.)	45
Medical Clinics	37
Bureau of Children's Services	3
Welfare Agencies	12
Legal Services	9
Board of Education	14
Employment Agencies	11
Vocational Guidance	7
Cultural Guidance	6
Summer Camps	3
Youth Aid Bureau	2
2. Moral and Emotional Support	122
3. Interpretive Guidance	123

REFERRALS ACCEPTED

A. Sources of Referrals	Number of Cases	90
Parochial Schools	71	
Mt. Carmel Guild	12	
Inter-Departmental	7	

B. Age-- Sex Distribution-- Reason for Referral

Age of Child	Reason for Referral 1969											
	Behavior		Parental Indiff.		Economic Defic.		Multiple		Others		Totals	Percent
	Male	Fem.	Male	Fem.	Male	Fem.	Male	Fem.	Male	Fem.	1	1
Under 7	3		2	1		1	3	1	1	1	12	13.4
7 to 9	4		4	3	3		5	2	1	1	22	24.4
10 to 12	3	1	8	2	2	1	5	4	2	2	30	33.4
13 to 15	4	2	5	4	3	2	1	2		1	24	26.7
16 to 17	1		1								2	2.1
TOTAL	15	3	20	10	8	4	14	9	4	3	90	100
Percentage	20		33.4		13.4		25.6		7.6			

STATISTICAL COMPARISON (1967- 1968)

1. Age Distribution

Statistical Years				
	1967	1968		
Age of Child	No. of Cases	Per Cent	No. of Cases	Per Cent
Under 7	9	15	12	13.4
7 - 9	14	23 1/3	22	24.4
10-12	15	25	30	33.4
13-14	18	30	24	26.7
16-17	4	6 2/3	2	2.1
Total	60	100%	90	100%

2. Distribution of Reason For Referral

Statistical Years				
	1967	1968		
Reason for Referral	No. of Cases	Per Cent	No. of Cases	Per Cent
Behavioral	15	35	18	20
Parental Indiffer.	29	15	30	33.4
Economic Defic.	3	5	12	13.4
Multiple	5	12 1/2	23	25.6
Miscell.	8	32 1/2	7	7.6
Total	60	100%	90	100%

3. DISTRIBUTION OF SOCIAL SERVICE EFFECTIVENESS FOR CASES CLOSED

1968

Problem Factor	Number of Cases	Resolved	Minimized	Not Resolved
Socio-Cultural	6	4	2	
Economic	13	12	1	
Physical	14	10	2	2
Psychological	22	16	3	3
Multiple	20	16	1	3
Miscellaneous	9	5	2	2
Total Closed	84	63	11	10

CHILD HYGIENE

William J. Spinosa, M.D.
Edward S. Szelewa, M.D.

Supervisor of P.H. Physicians
Public Health Physician

The prime purpose of the Child Hygiene Bureau is the supervision of normal infants and children, birth to four years of age, and retarded children to age thirteen. Such supervision aims at providing the necessary physical examinations and instructions to parents so that these infants and children will attain their maxima, potential both physical and mental. To this end fifteen Child Health Conference areas are strategically located throughout the City. Each Child Health Conference session is directed by a physician with two or more public health nurses.

The physicians' duties

1. Health appraisal
2. Counseling and guidance of the parent
3. Health history
4. Detection of deviations from normal or expected growth and development
5. Referral to other sources of care and services when indicated
6. Protection against communicable diseases
7. Group education and discussion with parents
8. Liaison with other community groups interested and concerned with infant and pre-school health and the environment
Physical and emotional in which the child lives
9. Physician in Service Program

Last year a special pre-conference talk to the assembled mothers by the Child Health Conference physician was instituted. This year this talk has been expanded and re-emphasized.

Toward the end of 1968 contracts were formulated for the removal of several of the Child Health Conferences located in the unpopular "store fronts" to the more pleasant atmosphere of the local community hospitals.

Information Concerning Births & Deaths

	<u>1966</u>	<u>1967</u>	<u>1968</u>
Total Births in Newark	11,493	10,676	10,168
Delivered in Hospitals	11,369	10,552	10,064
Delivered at Home	124	124	104
By Physician	110	33	-
By Others	14	91	-
% Delivered in Hospitals	98.9	98.8	98.9
% Infant Mortality per 1000 Births	33.8	38.6	36.8
% Deaths Under One Month per 1000 Births	24.5	30.3	26.8
% Deaths Under One Week per 1000 Births	21.2	26.9	23.1
% Deaths Under One Day per 1000 Births	10.4	17.7	14.7
% Stillbirths per 1000 Deliveries	18.5	22.2	20.7
Total Stillbirths	212	237	212
Total Deaths Under One Year	389	412	319

Deaths Under One Year by Causes

Measles	0	0	0
Bronchitis	0	1	0
Pneumonia	32	26	37
Meningitis	5	9	5
Diarrhea	3	4	0
Other Contagious Diseases	1	1	0
Congenital Debility-Prematurity	294	258	251
All Others	3	27	26
Totals	338	412	319

Lead Poisoning Investigation Program

	<u>1966</u>	<u>1967</u>	<u>1968</u>
Cases Investigated by Public Health Nurse	248	112	66
Cases referred to Sanitary Bureau for Housing Inspection	208	79	117
Urinies Tested for Coproporphyrins	1,720	-	-
Urinies Positive for Coproporphyrins	80	-	-
Bloods Obtained for Lead Determination at Health Division (Positive Urines)	110	134	-
Cases Diagnosed Lead Poison through Urine and Blood Testing Program	15	19	6
Cases Diagnosed Lead Poison During Entire Year	74	56	7

BUREAU ACTIVITIES
1968

	<u>1966</u>	<u>1967</u>	<u>1968</u>
Children under Public Health Nurse Supervision for Home Visits	8,810	9,976	4,945
Supervised Children born during 1968	4,441	3,843	2,616
Home Visits made by Public Health Nurses	29,411	28,463	22,910
Visits to Mentally Retarded Children	257	299	251
Number of Mentally Retarded Children under P. H. N. Supervision	85	68	53
Visits to Children in City Licensed Boarding Homes	44	83	72
Number of City Licensed Boarding Homes under supervision	21	11	19
Referrals from N. J. State Department of Health for Investigation of Unattended Births	89	79	100
Referrals from N. J. State Department of Health for Investigation of Lead Poison Program	212	130	69
Referrals from Poison Control Centers for Investigation	80	85	72
Referrals for Investigation and follow-up from Maternity Infant-Care Project	176	251	123
Total referrals to Sanitary Bureau for Housing Inspection	291	169	159
Child Health Conference Sessions scheduled	1,439	1,449	1,855
Visits to Child Health Conference Sessions	34,655	34,084	35,480
Children attending Child Health Conference Sessions	12,559	12,272	11,227
New Registrations during year	6,293	5,791	5,220
Re-registrations during year	6,266	6,481	6,007
Immunizations & Tests			
Diphtheria-Pertussis-Tetanus (Primary Series & Booster)	14,059	13,492	12,258
Sabin Vaccine	14,228	13,378	12,362
Smallpox Vaccine	2,480	2,444	2,769
Measles Vaccine	3,872	3,538	2,796
Tine Tests (TBC Screening)	2,703	2,916	3,274
Phenylketonuria Tests	6,799	6,486	6,034
Urines Tested for Coproporphyrins	1,720	-	-
Bloods obtained for Blood Lead Determination	110	-	-

CHILD HEALTH CONFERENCE STATIONS

<u>Day</u>	<u>Hour</u>	<u>Stations</u>	<u>Locations</u>
Monday	8:30 A.M.	Hyatt Ct.	54 Hawkins St.
	8:30 A.M.	Hayes Homes	7 17 th Ave.
	8:30 A.M.	362 So. 10 th St.	
	8:30 A.M.	Mt. Calvary Church	235 Seymour Ave.
	8:30 A.M.	455 Orange St.	
	8:30 A.M.	St. Rocco's Church	208 Hunterdon St.
	8:30 A.M.	St. Columba's School	23 Pennsylvania Ave.
	12:30 P.M.	Wright Homes	159 Spruce St.
	12:30 P.M.	Health Division	94 William St.
	12:30 P.M.	362 So. 10 th St.	
Tuesday	8:30 A.M.	Columbus Homes	112 8 th Ave.
	8:30 A.M.	362 So. 10 th St.	
	8:30 A.M.	Hayes Homes	7 17 th Ave.
	8:30 A.M.	St. Paul's Church	593 18 th Ave.
	8:30 A.M.	Walsh Homes	1945 McCarter Highway
	8:30 A.M.	Mt. Calvary Church	235 Seymour Ave.
	8:30 A.M.	455 Orange St.	
	8:30 A.M.	St. Rocco's Church	208 Hunterdon St.
	8:30 A.M.	Beth Israel Hospital	201 Lyons Ave.
	12:30 P.M.	Wright Homes	159 Spruce St.
Wednesday	12:30 P.M.	Columbus Homes	112 8 th Ave.
	8:30 A.M.	362 So. 10 th St.	
	8:30 A.M.	St. Paul's Church	593 18 th Ave.
	8:30 A.M.	Mt. Calvary Church	235 Seymour Ave.
	8:30 A.M.	St. Columba's School	23 Pennsylvania Ave.
	12:30 P.M.	Columbus Homes	112 8 th Ave.
	12:30 P.M.	Wright Homes	159 Spruce St.
	8:30 A.M.	Walsh Homes	1945 McCarter Highway
	8:30 A.M.	362 So. 10 th St.	
	8:30 A.M.	Hayes Homes	7 17 th Ave.
Thursday	8:30 A.M.	Pennington Ct.	189 Pacific St.
	8:30 A.M.	455 Orange St.	
	8:30 A.M.	St. Rocco's Church	208 Hunterdon St.
	8:30 A.M.	Ketchmer Homes	85 Ludlow St.
	8:30 A.M.	Beth Israel Hospital	201 Lyons Ave.
	12:30 P.M.	Wright Homes	159 Spruce St.
	12:30 P.M.	455 Orange St.	

PUBLIC HEALTH NURSING

Mary J. Hoban, R.N., M.A., Director of Nurses
Petrina Livechi, R.N., B.S., M.S., Asst. Director of Nurses

The new Bureau of Public Health Nursing is progressing with its aims and objectives in meeting the needs of the Community.

The Public Health Nurses who are assigned to Community Nursing Services are responsible for visiting the homes of mothers who have infants and pre-school children according to the needs who attend the Child Health Conference Sessions.

The nurses do Tuberculosis Skin Testing in the homes on all contacts of patients who have been reported to Newark Chest Bureau and they give streptomycin as ordered by the physician in charge of the patient.

The nurses supervise and instruct families with solving their health problems.

Specialized Nursing Services are conducted in the Vocational Schools and Out Patient Clinics in the Health Division. A staff of nurses are assigned to each of the above areas.

A new Social Service Case Worker has been assigned to the Community Nursing Service. The number of types of social problems found by the nurses are given to the Social Case Worker for correction. She works well with the Social Agencies and she has been instrumental in correcting many of the social problems found by the nurses. She speaks both Spanish and English which is very important in helping with the problems of the large number of Spanish speaking people in our city. (See report of Social Worker on subsequent page.)

A new Community Center has been set up recently for our Community Nursing Service. A staff of two supervisors, twelve-four nurses and three clerical workers have been assigned to the Center.

A telephone service has been installed in the Child Health Stations recently. Therefore a better means of communication has been established between the Bureau of Public Health Nursing, the new Center, and the work areas for Directors, Supervisors and Staff.

Monthly reports of the Community Nursing activities have been submitted to the Child Hygiene Bureau and the Chest Bureau to the physicians in charge to be used for the annual report.

The Nursing activities carried out in the Parochial Schools and in the Dispensary Clinics will be included in the annual reports submitted by both of those bureaus. (See Bureau Reports in the Annual Report book.)

During the year Seton Hall University School of Nursing, had planned for and arranged with the Bureau of Public Health Nursing to send student nurses for Field Experience to the Division of Health, Newark.

Two groups of students were assigned. One group of twenty students were with us for five weeks during the month of July and the first week of August. The second group of thirty students were assigned during the fall semester. The students observed and participated in the Public Health Nursing activities in the field.

We have asked for and received Public Health Nursing Consultative Services from the New Jersey State Department of Health Chief Nurse and her consultants. The State Department of Health Nursing Staff assisted our Bureau with setting up staff education programs and arranged for and sent speakers to lecture on the various aspects of Generalized Public Health Nursing.

The Bureau also had speakers from other specialized areas to lecture and show slides to the nurses on various health and social problems which are prevalent in our city at present.

Plans are being made to expand our Public Health Nursing functions during the coming year.

NEW PROGRAM SECTIONS REPORT

Petrina Livecchi, R.N., M.S., Assistant Director of Nurses

Sections Community Organization
Hospitals and Institutions
Plans and Programming

In 1968, the Bureau of Public Health Nursing assigned three Public Health

P H. Nursing (cont'd)

NEW PROGRAM SECTIONS-REPORT

Nurses as staff each to act as liaison between the Division of Health and one of the newly created sections of

Community Organization
Hospitals and Institutions
Plans and Programming Coordination

Their activities relate to health programs - current ones, those in planning and those anticipated - in order to foster comprehensive health services for all the population.

The purpose of these sections is to promote comprehensive health care in the community and provide for continuity of patient care.

The program began with a period of orientation of indoctrination in organization planning and operational procedure. This involved complete familiarization with the Division of Health Services and community resources including

administrative procedures
assessing community needs
availability of facilities to meet these needs
attending related conferences, lectures, seminars
visiting related organizations, agencies, hospitals, institutions and physicians

The attempt to implement the program involved

- setting up a comprehensive directory
- beginnings of a unit file
- letters of introduction to parties of concern and involvement
- visits to same

by

introductory visits to hospitals, institutions, agencies
receiving information concerning their aims, objectives, needs and programs
explanation of aims and objectives of program
relating services of Division of Health
making follow-up visits as needed

Priority for this program was given to the Tuberculosis Control Program. Liaison was established with hospitals, institutions, organizations, and private physicians. Emphasis was placed on reporting. Each area was given instruction on reporting and use of new forms. Plans are being made next for liaison activity in the Maternal and Child Health Programs. Through the contacts and efforts of the liaison nurses, agencies have requested information and assistance in planning programs.

PH Nursing (cont'd)

NEW PROGRAM SECTIONS-REPORT

Some specific liaison activities of the three sections besides the above mentioned were

- AFL-CIO Apprentice Painters Union Health Program
- Senior Citizens Committee Program
- Participation in the community health workshop as panelist on radio station "WNJR"
- Newark, Bessie Smith Center
- Queen of Angels Church Health Center
- Planned Parenthood Meeting
- Model Cities Health Task Force
- The proposed King-Kennedy Academy Newark, Health Task Force
- St James Hospital-Mantoux testing program in Pediatrics
- Overbrook Hospital-conference
- N J College of Medicine-conference
- Essex County Penitentiary-procedure in problems of Gonorrhea
- Essex County College-provided some information to be used in setting up health program
- Marlboro Hospital-information received on clinics, eligibility
 - worked out system of obtaining delinquent reports on tuberculosis
 - patients having been hospitalized or treated
- Newark Measles Program assisted with planning
- Multi Phasic Screening Program
- University Students' Program
- All Newark hospitals were visited and instruction given on use of the new Tuberculosis reporting forms
- All physicians known to carry Newark Tuberculosis cases were visited and instruction given on new Tuberculosis reporting forms
- Essex County Tuberculosis Sanatorium-visits are made to the Sanatorium to interview patients for contacts and to speak with them concerning any problems or needs. Where possible this information is related to the Public Health Nurse in the field or the Social Worker. The Social Worker at the Sanatorium also contacts the liaison nurse concerning patient problems and needs.

The work of the three sections has developed at a steady pace. Future liaison activity will involve all health areas of the community.

During the nine months of operation, the work done by the three sections proved to be a valuable asset to the Bureau of Public Health Nursing and the community.

Public Health Nurse Activities-Three Sections

Visits-Essex County Tuberculosis Sanatorium	12
-Hospitals	26
-Institutions	19
Physicians	45
Agencies	72
Ancillary Interviews-Tuberculosis Control Program	67
Orientation and Indoctrination Sessions attended	56
Conferences and Meetings attended	30

P.H. Nursing (cont'd)

SOCIAL SERVICE SECTION

Report of the newly appointed Social Worker
for the months of October, November, and December, 1968.

INTAKE:

Referrals Received	40	
Referrals Accepted	40	40

CASELOAD COUNT:

New Cases	58	
Cases Terminated	+	
Active Cases		34

PROCEDURES:Interviews

With Cases	46	
With other Interested &		
Informed parties	10	
Total Interviews		56

Visits

Home	54	
Other Agencies	19	
Total Visits		53

Conferences

Inter-department	24	
Other Agencies	21	
Total Conferences		45

Correspondence

Telephone Calls		106
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SERVICES RENDERED:

Referrals to Other Agencies	28	
Interpreter	9	
Moral and Emotional Support	5	
Guidance	9	
Total Services rendered		47
STATISTICAL TOTAL		389

DENTAL HEALTH

Harold R. Harlan, D.D.S., M.P.H., Supv. Dentist

Walter Reilly, D.D.S., Ass't Supv. Dentist

Frank D'Elia, D.D.S., Asst. Supv. Dentist

Gladys Badger, R.D.H., Dental Hygienist

The Dental Health Program during 1968 included dental care for the disadvantaged youth applicants of the Anti-Poverty Programs of the city of Newark. Namely, T E A. M .S E E D , Pre-School Council.

The changing population of the city imposes an administrative and operative block in controlling patient load. The program continues to emphasize Preventive Dentistry for children of the elementary grades in the Parochial and Public Schools through early case findings, dental health education and follow-up procedures. These measures are facilitating corrective and completion treatments to initial cases and incremental maintenance care to old cases.

The mechanism of early case finding and follow-up is maintained in the parochial school population through the Dental Hygienist, examining dentists, school nurses and principals. The Public School children are surveyed by the supervising dentist of the Board of Education and these children are referred to the Bureau of Dental Health for treatment services. The follow-up technic includes a re-evaluation of all parochial children examined during a three months period. All dental defects that have not been corrected are then brought to the attention of the school nurse and parent for further disposition. All children admitted for treatment must present medical and social service clearances which are initiated by the school nurse. This policy of dental defect awareness has resulted in directing more children to treatment in private offices and our clinics.

The role of the Dental Hygienist is of great importance in the area of Dental Health Education through all year round activities in the parochial schools namely, class room lectures in dental hygiene, free toothbrush distributions, tooth brush demonstrations, visual aids, moving pictures, film strips, nutritional instructions and parent conferences. The hygienist is the liaison with the parochial school system in arranging the surveys, lectures and appointments.

The Dental Bureau through the Dental Hygienist was coordinating with City Hospital in a new expanded project of Maternal and Infant care for pre-natal adolescent mothers in the areas of Dental Health counseling and referral of these patients for necessary dental care. At the Baby-Keep-Well stations, the young mothers received dental health counseling and referral for dental care for themselves and their infants and pre-school children.

Chairside dental hygiene instructions are given to each patient at the initial visit by dental clinician.

In the areas of prevention and control, topical applications of Stannous Fluoride are routinely utilized for all clinic patients age 2 to 13. Thus preventive procedure along with good tooth brush habit, balanced nutritional diet, emphasizing a low in-take of sugar rich foods and regular routine dental maintenance care, are measures which are proving effective in reducing dental decay in our school children.

We renewed our efforts to accomplish the fluoridation of our community water supply to effectively reduce the high incidence of dental caries. It is estimated that up to two thirds of dental caries in the younger age group might have been prevented if fluoridation of the public water had been adopted in Newark.

Specialized services in the fields of endodontics, oral surgery and preventive orthodontics are carried out by assigned dental specialists.

The seven clinic facilities are located in parochial schools, housing projects, boys' clubs and the Health Department serving indigent children in both public and parochial schools.

Adult dental care consists of examination, diagnosis, X-rays, extractions, fillings and periodontal treatments.

We hope to increase productivity through additional personnel and reopening several clinics now closed due to lack of funds.

"Dental Health is fundamental to economic self sufficiency."

DENTAL REPORT

	<u>1967</u>	1968
No. of Individual Children	5 610	4 572
No. of Children Visits	13 610	13 112
No. of Children Treatments	25.512	22.316
No. of Individual Adults	1 350	1 205
No. of Adult Visits	3 579	3,392
No. of Adult Treatments	3,244	3,733
No. of Dental X Rays	10 951	6,566
No. of T E A. M. Dental Examinations	-	964

Dental Health Program in Parochial Schools

Children in need of dental care	3,362	2,711
Children not in need of dental care	1,609	1,567
Total children examined	4,971	4,278
Total classroom lectures	171	148

Follow-up

Brought to treatment	1,035	976
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Dental Health Maternal Infant Care Project

Appraisals	75	159
Individual lectures	155	159

PUBLIC HEALTH LABORATORIES

These laboratories make food, milk and water examinations for the Health Division, and diagnostic tests for local hospitals, physicians and Health Division Clinics.

Carl Cordasco, B.S., R.P., Asst. Hlth. Off.
 Guido Petruccelli, B.A. Pre. Med. Acting
 Chf. Supv. Pub. Hlth. Lab.
 Meyer Levey, B.Sc.-Chief Serologist
 Sara Rothberg, B.S. Chief Chemist

1968

<u>bacteriological</u>	<u>Total</u>	<u>Positive</u>	<u>Total</u>	<u>Positive</u>
Diphtheria Culture	40	0	58	0
Tuberculosis Sputa	2,210	32	3,092	93
Typhoid-Stool & Urine	1,400	95	658	28
Feces - Dysentery	49	0	485	9
Feces - Amoeba	0	0	0	0
Feces-Ova & Parasites	491	69	381	63
Darkfields	2	0	60	15
Rabies (Brain Exam.)	6	0	7	0
Vincent's Angina Smears	63	25	59	19
Trich.Vag.	1	0	469	13
Gonorrhoea Cultures	248	39	2,110	337
Gonorrhoea Smears	12,578	4,348	9,612	3,164
Undulant Fever	0	0	0	0
Ophthalmic Gonorrhoea	10	0	5	2
Epidemic Meningitis	0	0	0	0
Water-pool examinations	204		338	
Milk & Cream exams.	3,677		3,643	
Shellfish	41		45	
Frozen Confections	93		149	
Misc.exams.-foods, swabs for utensils, rinse water, pollen counts, T.B.cultures, leads				
Total Bacteriology	4,988		1,318	
	26,101	4,608	22,589	5,743

Chemical

	<u>Total</u>	<u>Total</u>
Milk	2,771	2,730
Cream	844	867
Ice Cream	135	148
Pools - city water	234	238
Meat	121	114
Miscellaneous tests including lead	3706	3,155
Number of analyses	7327	8,792
Total Chemistry	15,138	16,044

1968

<u>Serological & Hematol.</u>	<u>Total</u>	<u>reactive</u>	<u>Total</u>	<u>reactive</u>
Premarital (R.P.R.)	4,431	11	4,162	14
Prenatal "	3,526	5	3,117	52
Domestics "	1,349	11	107	52
Priv. Doctors "	11,090	368	12,580	506
Dispensary "	12,850	331	7,018	299
Luetic Clinic "	12,460	1,074	7,953	1,192
Quant. tests "	2,063	2,063	2,569	2,569
Hospitals "	7,720	311	903	483
Total R.P.R. tests	55,499	4,174	43,369	1,174

Confirm. Wassermans (Not performed in 1968 or 1967)

Spinal Fluids	637	852
RH Fact.Determ.-pos	5,205	3,708
RH Fact. " -neg	443	373
Neter. Antib.Determ.	3	0
Urinalysis	9,991	7,751
Complete Blood Counts	777	668
Blood Sugars	1,652	1,184
Sedimentation Rates	105	86
Bleeding & Cl. tting Time	10	6

Total Serol. & Hematol. 74,322 4,174 . 5,107

NOTE: Special examinations included horsemeat, added sulphites, excessive fat content in meats, artificial coloring and flavoring, fat percentages, oils, drugs, as well as routine tests of swimming pool water for free chlorine.

TOTAL TESTS - all labs. 115,561 96,530

WITHDRAWN